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### FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example:If typing, type COMMITTEE (in full) OR TYPE OR PRINT ₩ over the lines American Hospital Association PAC 325 Seventh Street, NW ADDRESS (number and street) Suite 700 Check if different than previously Washington DC 20004 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** ZIPCODE 🛋 CITY A IS THIS NEW **AMENDED** C00106146 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Χ Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) 12-Day (c) Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Runoff (30R) Post -Election General (30G) Special (30S) Report for the: Termination Report (TER) in the Election on State of 06 0 1 2009 06 30 2009 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Ms. Melinda Hatton Type or Print Name of Treasurer Electronically Filed by Ms. Melinda Hatton 07 16 2009 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004) Only

FE6AN026

### **SUMMARY PAGE**

OF RECEIPTS AND DISBURSEMENTS

2/162

Write or Type Committee Name American Hospital Association PAC

FEC Form 3X (Rev. 02/2003)

F	Report Covering the Period: From: 0 6	01 2009	To: 0.6 3.0 2.00.9
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand  January 1 2009 Y Y Y		1339674.06
	(b) Cash on Hand at Begining of Reporting Period	1411469.17	
	(c) Total Receipts (from Line 19)	188256.78	666927.06
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1599725.95	2006601.12
7.	Total Disbursements (from Line 31)	165729.45	572604.62
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1433996.50	1433996.50
9.	Debts and Obligations owed the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information contact:

X This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

### DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) 3 / 162

Write or Type Committee Name
American Hospital Association PAC

Report Covering the Period:

From: 0 6

01

2009

то.

м м 0 6 <sup>D</sup> 3 0

<sup>Y</sup> 2009

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date	
Contributions (other than loans) From:     (a) Individuals/Persons Other			
Than Political Committees (i) Itemized (use Schedule A)	127671.15	284015.57	
(ii) Unitemized	46845.25	94391.14	
(iii) TOTAL (add Lines 11(a)(i) and (ii)	174516.40	378406.71	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)(d) Total Contributions (add Lines	0.00	0.00	
11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	174516.40	378406.71	
Transfers From Affiliated/Other     Party Committees	12550.00	264650.00	
3. All Loans Received	0.00	0.00	
Loan Repayments Received     Offsets To Operating Expenditures	0.00	0.00	
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)  6. Refunds of Contributions Made	0.00	0.00	
to Federal candidates and Other Political Committees	1000.00	22000.00	
7. Other Federal Receipts (Dividends, Interest, etc.)	190.38	1870.35	
3. Transfers from Non-Federal and Levin Funds			
(a) Non-Federal Account (from Schedule H3)	0.00	0.00	
(b) Levin Funds (from Schedule H5)	0.00	0.00	
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00	
9. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	188256.78	666927.06	
). Total Federal Receipts (subtract Line 18(c) from Line 19)	188256.78	666927.06	

### **DETAILED SUMMARY PAGE**

FEC Form 3X (Rev. 02/2003)

of Disbursements

4 / 162

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures:  (a) Shared Federal/Non-Federal		1
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share		
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	229.45	4154.62
	Expenditures(c) Total Operating Expenditures	229.40	7107.02
	(add 21(a)(i), (a)(ii) and (b))	229.45	4154.62
22.	Transfers to Affiliated/Other Party	0.00	0.00
23.	Contributions to	0.00	0.00
	Federal Candidates/Committeesand Other Political Committees	165500.00	568450.00
4.	Independent Expenditure	0.00	0.00
25.	(use Schedule E)	0.00	0.00
	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26.	Loan Repayments Made	0.00	0.00
· ¬	Lasta Mada	0.00	0.00
	Loans Made Refunds of Contributions To:	0.00	0.00
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00
		0.00	0.00
	<ul><li>(b) Political Party Committees</li><li>(c) Other Political Committees</li></ul>	0.00	0.00
	(such as PACs)	0.00	0.00
	(d) Total Contribution Refunds	0.00	0.00
	(add Lines 28(a), (b), and (c))	0.00	0.00
9.	Other Disbursements	0.00	0.00
30.	Federal Election Activity (2 U.S.C 431(20))		
	(a) Shared Federal Election Activity		
	(from Schedule H6) (i) Federal Share	0.00	0.00
	(i) rederal Strate		
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add	0.00	0.00
	Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31.	Total Disbursements (add Lines 21(c), 22,	12	
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	165729.45	572604.62
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	165729.45	572604.62

### **DETAILED SUMMARY PAGE**

of Disbursements

III. Net Contributions/Operating Expenditures		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date	
33.	Total Contributions (other than loans) from Line 11(d), page 3)	174516.40	378406.71	
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00	
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	174516.40	378406.71	
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	229.45	4154.62	
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00	
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	229.45	4154.62	

FE6AN026

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>5</b> A)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 6 / 162   (check only one)
Any information copied from such Reports or for commercial purposes, other than usi	and Statements may	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  American Hospital Association P			
Full Name (Last, First, Middle Initial) Mr. Reginald M. Ballantyne, III			Date of Receipt
Mailing Address 3266 East Valley	M M / D D / Y Y Y Y Y Y O D D / 2009		
City Paradise Valley	State AZ	Zip Code 85253-3738	Transaction ID: 17229577  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Vanguard Health System	Occupation Corporate	n e Officer & Senior Vice Pres	id
Receipt For:  Primary General  Other (specify) ▼	<del> </del>	Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Mr. Laurence A Tanner	Date of Receipt		
Mailing Address P O Box 100	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City New Britain	State CT	Zip Code 06050-0100	Transaction ID: 17229981
FEC ID number of contributing federal political committee.	C	00030-0100	Amount of Each Receipt this Period 500.00
Name of Employer Hospital of Central Conne- cticut, The	Occupation President	n t and Chief Executive Office	<del>-</del>
Receipt For:  Primary General  Other (specify) ▼	<del>- '</del>	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Thomas C. Dolan, Ph.D., FAC			Date of Receipt
Mailing Address 339 Cottage Hill	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	State	Zip Code	Transaction ID: 17230338
Elmhurst  FEC ID number of contributing federal political committee.	C	60126-3332	Amount of Each Receipt this Period 500.00
Name of Employer American College of Healt- hcare Executi		t and Chief Executive Office	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
			2000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 162 (check only one)    X		
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements mand add	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions		
Full Name (Last, First, Middle Initial) Ms. Margaret B Ferree Mailing Address P.O. Box 279  City	Ms. Margaret B Ferree  Mailing Address P.O. Box 279				
Easton  FEC ID number of contributing federal political committee.	State MD	Zip Code 21601-8903	Transaction ID: 17231923  Amount of Each Receipt this Period  255.00		
Name of Employer Shore Health System  Receipt For:  Primary General  Other (specify) ▼	Occupatio Trustee Aggregate	e Year-to-Date ▼ 255.00	]		
Full Name (Last, First, Middle Initial) Mr Monte Akridge  Mailing Address 3300 NW Expresswa	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City State  Oklahoma City OK  FEC ID number of contributing federal political committee.  C		Zip Code 73112-4418	Transaction ID: 17240159  Amount of Each Receipt this Period  250.00		
Name of Employer Integris Baptist Medical Center Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupatio Vice Pres Aggregate		]		
Full Name (Last, First, Middle Initial) Mr. Rex Jones Mailing Address P O Box 1038	Mr. Rex Jones				
City Okmulgee FEC ID number of contributing federal political committee.	State OK	Zip Code 74447-1038	Transaction ID: 17240162  Amount of Each Receipt this Period  250.00		
Name of Employer Okmulgee Memorial Hospital  Receipt For: Primary General Other (specify)		n ecutive Officer e Year-to-Date  250.00	1		
SUBTOTAL of Receipts This Page (optional)			755.00		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 162 (check only one)  X 11a 11b 11c 12	
Any information copied from such Reports and or for commercial purposes, other than using t	d Statements may not be sold or used by any person he name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.	
NAME OF COMMITTEE (In Full)  American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. Brian E. Keeley			
Mailing Address 6855 Red Road, Suit	Date of Receipt    M   M   D   D   V   Y   Y   Y   Y   Y   Y   Y   Y   Y		
City	State Zip Code	Transaction ID: 17240271	
Coral Gables	FL 33143-3632	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	1000.00	
Name of Employer Baptist Health South Flor- ida	Occupation President and Chief Executive Officer		
Receipt For:	Aggregate Year-to-Date ▼	_	
Primary General Other (specify) ▼	1000.00		
Full Name (Last, First, Middle Initial) Mr. Kevin N Fowler	Date of Receipt		
Mailing Address 10 Mountain Meadow	06 02 7 2009		
City	State Zip Code	Transaction ID: 17240276	
<u>Chapmanville</u>	WV 25508	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	350.00	
Name of Employer Logan Regional Medical Ce- nter	Occupation Chief Executive Officer		
Receipt For:	Aggregate Year-to-Date ▼		
Primary General Other (specify) ▼	350.00		
Full Name (Last, First, Middle Initial) Mr. Donald E. McDaniel, III		Date of Receipt	
Mailing Address Rt. 4, Box 32AA	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	State Zip Code	Transaction ID: 17240277	
Chapmanville	WV 25508-9719	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	250.00	
Name of Employer Logan Regional Medical Ce- nter	Occupation CFO	]	
Receipt For:	Aggregate Year-to-Date ▼		
Primary General Other (specify) ▼	250.00		
	<b>_</b>	1600.00	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 162 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	tatements ma name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ <b>4</b> .	Full Name (Last, First, Middle Initial) Dr. Howard Neiberg, M.D. Mailing Address 1388 National Road Apt. #3			Date of Receipt  0 6 0 2 2 0 0 9
	City	State WV	Zip Code	Transaction ID: 17240279
	Wheeling FEC ID number of contributing federal political committee.	C	26003-5715	Amount of Each Receipt this Period 250.00
	Name of Employer Reynolds Memorial Hospital  Receipt For: Primary General Other (specify)	_	Radiology Department e Year-to-Date  250.00	
_ 3.	Full Name (Last, First, Middle Initial) Ms. Elizabeth L Aderholdt Mailing Address 8077 Hawkcrest Drive	Date of Receipt  0 6 0 2 2 0 0 9		
	City	Transaction ID: 17240318		
	Grand Blanc FEC ID number of contributing federal political committee.	C	48439-2422	Amount of Each Receipt this Period 550.00
	Name of Employer Genesys Health System	Occupation Presiden		
	Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 550.00	
- ;.	Full Name (Last, First, Middle Initial) Mr. Clark Ballard			Date of Receipt
<b>,</b> .	Mailing Address 1601 Willoughby Road	0 6 0 2 2 0 0 9		
	City	State	Zip Code	Transaction ID: 17240319
	Mason FEC ID number of contributing	MI	48854-9435	Amount of Each Receipt this Period 750.00
	federal political committee.	Occupatio	n .	730.00
	Name of Employer Michigan Health & Hospital Association	Senior V	ice President	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 750.00	
	SUBTOTAL of Receipts This Page (optional)			1550.00
	TOTAL This Period (last page this line number)			

SCHEDULE A (FEC ITEMIZED RECEIPT	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 162 (check only one)    X   11a	
Any information copied from suc or for commercial purposes, oth NAME OF COMMITTEE (In American Hospital Asso	er than using the name and Full)	may not be sold or used by any personal address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.	
Mrs. Amy Barkholz	Full Name (Last, First, Middle Initial)			
City <u>Mason</u>	State MI	Zip Code 48854-1390	Transaction ID: 17240320  Amount of Each Receipt this Period	
FEC ID number of contribution federal political committee.	C		250.00	
Name of Employer Michigan Health & Hospital Association Receipt For:  Primary Gene Other (specify) ▼	Aggreg	ation al Counsel ate Year-to-Date ▼  250.00		
Dr. Terry L. Baxter	Full Name (Last, First, Middle Initial) Dr. Terry L. Baxter Mailing Address 6372 Buckham Wood Dr.			
City	State	0 6 0 2 2 0 0 9  Transaction ID: 17240321		
Kalamazoo	MI	49009-7597	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	ng C		250.00	
Name of Employer Borgess Health Alliance	Occupa Chief N	ation Medical Officer		
Receipt For:  Primary Gene Other (specify) ▼		ate Year-to-Date ▼ 250.00		
Full Name (Last, First, Middle Mr. Jim Bogan	e Initial)		Date of Receipt	
Mailing Address 1207 Bir				
City	State MI	Zip Code	Transaction ID: 17240325	
Houghton  FEC ID number of contribution federal political committee.		49931-1652	Amount of Each Receipt this Period 500.00	
Name of Employer Portage Health	Occupa Presid			
Receipt For:  Primary Gene Other (specify) ▼		ate Year-to-Date ▼ 500.00		
			1000.00	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 162 (check only one)    X
A	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any person name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Mr. Alan W Brass, , FACHE		Date of Receipt
	Mailing Address 1801 Richards Road	7.0.1	06 02 2009
	City <u>Toledo</u>	State Zip Code OH 43607-1037	Transaction ID: 17240328  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Bixby Medical Center	Occupation Chief Executive Officer and President	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
	Full Name (Last, First, Middle Initial) Mr. Richard C Breon	Date of Receipt	
	Mailing Address 4177 Thousand Oaks	06 02 7 9 9	
	City	Transaction ID: 17240351	
	Grand Rapids	MI 49525-9410	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Spectrum Health	Occupation President and Chief Executive Officer	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	500.00	
	Full Name (Last, First, Middle Initial) Mr Edward Bruff	I	Date of Receipt
	Mailing Address 1447 North Harrison S	0 6 0 2 2 0 0 9	
	City Saginaw	State Zip Code MI 48602-4727	Transaction ID: 17240352  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C 40002-4727	450.00
	Name of Employer Covenant Medical Center	Occupation Executive Vice President and Chief Open	D <del>e</del>
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
Г		<b>&gt;</b>	1450.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 162 (check only one)  X 11a 11b 11c 12  13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any persone name and address of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Mark E Bush Mailing Address 515 South Quarter S  City Gladwin FEC ID number of contributing federal political committee.  Name of Employer MidMichigan Health Receipt For:	treet  State Zip Code MI 48624-1959  C  Occupation Executive Vice President  Aggregate Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Mr. Barton Buxton  Mailing Address 1018 Grandview Driv	250.00	Date of Receipt
City  Rochester Hills  FEC ID number of contributing federal political committee.	State Zip Code MI 48306-4027	Transaction ID: 17240354  Amount of Each Receipt this Period  500.00
Name of Employer Lapeer Regional Medical Center Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation President and Chief Executive Office Aggregate Year-to-Date  500.00	
Full Name (Last, First, Middle Initial) Mr. James M. Connelly Mailing Address 7123 Kennowy Court	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City West Bloomfield  FEC ID number of contributing federal political committee.	State         Zip Code           MI         48322-3276	Transaction ID: 17240357  Amount of Each Receipt this Period  500.00
Name of Employer Henry Ford Health System  Receipt For:  □ Primary □ General  Other (specify) ▼	Occupation Senior Vice President and Chief Fina  Aggregate Year-to-Date ▼  500.00	no ]
SUBTOTAL of Receipts This Page (optional)	·····	1250.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 162 (check only one)    X
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions
<b>∠</b> <b>4</b> .	Full Name (Last, First, Middle Initial) Mr. Brian M Connolly Mailing Address One Parklane Blvd, St	Date of Receipt  0 6 0 2 2 0 0 9		
	City  Dearborn  FEC ID number of contributing federal political committee.	State MI	Zip Code 48126-4241	Transaction ID: 17240358  Amount of Each Receipt this Period  500.00
	Name of Employer Oakwood Healthcare, Inc.  Receipt For:  Primary  General  Other (specify) ▼		t and Chief Executive Officer e Year-to-Date ▼ 500.00	
3.	Full Name (Last, First, Middle Initial) Mr. William Conway  Mailing Address 998 Brookwood St.	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City Birmingham	State MI	Zip Code 48009-1102	Transaction ID: 17240359  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Henry Ford Health System  Receipt For: Primary General Other (specify)	Occupation Administ Aggregate		
- ).	Full Name (Last, First, Middle Initial) Mr. J. Paul Conway			Date of Receipt
	Mailing Address 44010 Deep Hollow Ci	06 02 2009		
	City <u>Northville</u>	State MI	Zip Code 48168-8412	Transaction ID: 17240362  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Oakwood Healthcare, Inc.  Occupation Sr. Vice President - Human Resou			s
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)		·····	1250.00
	TOTAL This Period (last page this line number	only)	<b>&gt;</b>	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 162 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
[	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements mage name and add	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
	American Hospital Association PAC			
Α.	Full Name (Last, First, Middle Initial) Mr. Rob Covert Mailing Address 200 North Madison St			Date of Receipt
				06 02 2009
	City <u>Marshall</u>	State MI	Zip Code 49068-1143	Transaction ID: 17240363  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Oaklawn Hospital	Occupatio Presiden	on It and Chief Executive Office	 r
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
В.	Full Name (Last, First, Middle Initial) Mr. Thomas D DeFauw Mailing Address 1001 Pine Cross Asset	Date of Receipt		
	Mailing Address 1221 Pine Grove Aver	06 02 4 2009		
	City Port Huron	State MI	Zip Code 48060-3511	Transaction ID: 17240364  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40000-3311	600.00
	Name of Employer Port Huron Hospital	Occupatio Presiden	n It and Chief Executive Office	r_
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 600.00	]
с. С.	Full Name (Last, First, Middle Initial) Mr. Randy DeGroot			Date of Receipt
	Mailing Address 299 Western Avenue			06 02 2009
	City Coldwater	State MI	Zip Code 49036-1043	Transaction ID: 17240365
	FEC ID number of contributing federal political committee.	C	49030-1043	Amount of Each Receipt this Period  300.00
	Name of Employer Community Health Center of Branch Coun	<del>, '</del>	t and Chief Executive Office	r
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
	SUBTOTAL of Receipts This Page (optional)			1150.00
	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	for each category of the  Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 162 (check only one)  X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  American Hospital Association PAGE	nd Statements may not be sold or used by any person the name and address of any political committee to s	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Jack L Denton		Date of Receipt
Mailing Address P O Box 130		06 02 2009
City	State Zip Code	Transaction ID: 17240366
Eaton Rapids	MI 48827-0130	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	375.00
Name of Employer Eaton Rapids Medical Cent- er	Occupation President and Chief Executive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) Ms. Margaret Dimond		Date of Receipt
Mailing Address 32400 Sylvan Lane	)	M M / D D / Y Y Y Y Y Y O O O O O O O O O O O O O
City	State Zip Code	Transaction ID: 17240370
Beverly Hills	MI 48025-2927	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	375.00
Name of Employer McLaren Health Care Corpo- ration	Occupation Hospital Administration	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) Mr. J. Patrick Dyson	I	Date of Receipt
Mailing Address P.O. Box 51167		06 02 7 2009
City	State Zip Code	Transaction ID: 17240371
Kalamazoo	MI 49005-1167	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	375.00
Name of Employer Borgess Health Alliance	Occupation Executive Vice President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	
SUBTOTAL of Receipts This Page (optional	al)	1125.00

TOTAL This Period (last page this line number only) .....

SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 162 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using t	d Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Timothy J. Eckels		Date of Receipt
Mailing Address 25654 Island Lake D		06 02 7 2009
City <u>Novi</u>	State Zip Code MI 48374-2175	Transaction ID: 17240373  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Trinity Health	Occupation Vice President, Public Policy	_
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. John Ennest		Date of Receipt
Mailing Address 8167 Sawgrass Trail		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17240374
Grand Blanc	MI 48439-2410	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Genesys Health System	Occupation Trustee	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr. Garry C Faja		Date of Receipt
Mailing Address 920 Aberdeen		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code MI 48104-2808	Transaction ID: 17240376
Ann Arbor FEC ID number of contributing federal political committee.	MI 48104-2808	Amount of Each Receipt this Period  1000.00
Name of Employer St. Joseph Mercy Hospital	Occupation President and Chief Executive Officer	1
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SURTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·	1500.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 162 (check only one)  X 11a 11b 11c 12 13 14 15 16 11		
Any information copied from such Reports or for commercial purposes, other than us NAME OF COMMITTEE (In Full)  American Hospital Association F	and Statements may not be sold or used by any personing the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.		
Full Name (Last, First, Middle Initial) Mr. Michael J Falatko Mailing Address 6117 Sunset Rid	ge Drive	Date of Receipt		
City	State Zip Code	0 6 0 2 2 0 0 9  Transaction ID: 17240377		
Cass City  FEC ID number of contributing federal political committee.	MI 48726-1008	Amount of Each Receipt this Period  250.00		
Name of Employer Hills and Dales General Hospital Receipt For:  Primary General Other (specify) ▼	Occupation Chief Executive Officer  Aggregate Year-to-Date   250.00			
Full Name (Last, First, Middle Initial) Mr. David S. Finkbeiner Mailing Address 85 Damon Road		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	State Zip Code	Transaction ID: 17240396		
Haslett FEC ID number of contributing federal political committee.	MI 48840-9747	Amount of Each Receipt this Period 583.38		
Name of Employer Michigan Health & Hospital Association Receipt For:	Occupation Senior Vice President, Advocacy Aggregate Year-to-Date ▼	_		
Primary General Other (specify) ▼	583.38			
Full Name (Last, First, Middle Initial) Ms. Georgia R Fojtasek		Date of Receipt		
Mailing Address 5325 Browns Lal				
City	State Zip Code	Transaction ID: 17240397		
Jackson  FEC ID number of contributing federal political committee.	MI 49203-5602	Amount of Each Receipt this Period 500.00		
Name of Employer Allegiance Health	Occupation President and Chief Executive Officer			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00			
	onal)	1333.38		

SCHEDULE A (FEC Form	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 162 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
Any information copied from such Report or for commercial purposes, other than NAME OF COMMITTEE (In Full)  American Hospital Association	orts and Statements may not be sold or used by any person using the name and address of any political committee to PAC	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Dwight Gascho Mailing Address 9325 Pt Charit  City Pigeon  FEC ID number of contributing federal political committee.  Name of Employer Scheurer Hospital  Receipt For: Primary General		Date of Receipt  M M M / D D / Y Y Y Y Y Y  O 0 2 / 2 0 0 9  Transaction ID: 17240399  Amount of Each Receipt this Period  250.00
Other (specify)   Full Name (Last, First, Middle Initial)  Mr. Sean Gehle  Mailing Address 1828 Boston B		Date of Receipt
City  Lansing  FEC ID number of contributing federal political committee.  Name of Employer St. John Health - Remote Office Receipt For:  Primary General Other (specify)	State Zip Code MI 48910-1173  C  Occupation Vice President, Advocacy  Aggregate Year-to-Date  250.00	Transaction ID: 17240409  Amount of Each Receipt this Period  250.00
Full Name (Last, First, Middle Initial) Mr. Daniel M. George Mailing Address 672 Morningsid  City Grand Blanc  FEC ID number of contributing federal political committee.  Name of Employer Covenant Medical Center  Receipt For: Primary General Other (specify)		Date of Receipt  M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (or	otional)	850.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 162 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any persor the name and address of any political committee to	n for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Ira Ginsburg Mailing Address 2745 Southwood Driv City East Lansing	ve State Zip Code MI 48823-2344	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee.  Name of Employer Sparrow Hospital	Occupation Occupation	250.00
Receipt For: Primary General Other (specify)	Senior VP, Operations  Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial) Ms. Carol Goffnett  Mailing Address 4252 Magrudder Roa	ad	Date of Receipt    M M
City	State Zip Code	Transaction ID: 17240418
Saint Louis	MI 4880-9103	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	425.00
Name of Employer Grand View Hospital	Occupation CEO	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	
Full Name (Last, First, Middle Initial) Mr Mark E Gronda	•	Date of Receipt
Mailing Address 2109 Durham		0 6 0 2 7 2 0 0 9
City	State Zip Code MI 48609-9236	Transaction ID: 17240419
Saginaw  FEC ID number of contributing federal political committee.	MI 48609-9236	Amount of Each Receipt this Period 450.00
Name of Employer Covenant Medical Center	Occupation Vice President and Chief Financial Of	f
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
SUBTOTAL of Receipts This Page (optional)		1125.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 162 (check only one)  X 11a 11b 11c 12 15 16 11
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  American Hospital Association PAG	d Statements may not be sold or used by any person the name and address of any political committee to s	for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mrs. Sylvia Hagenlocker Mailing Address 290 Lone Pine Rd.  City	State Zip Code	Date of Receipt    M
Bloomfield Hills  FEC ID number of contributing federal political committee.	MI 48304-3543	Amount of Each Receipt this Period 250.00
Name of Employer Beaumont Hospital - Royal Oak Receipt For:  ☐ Primary ☐ General Other (specify) ▼	Occupation Trustee  Aggregate Year-to-Date   250.00	_
Full Name (Last, First, Middle Initial) Mr. Gary Henriksen Mailing Address 350 Crosswind Driv	re	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17240422
Dimondale	MI 48821-9795	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	750.00
Name of Employer Michigan Health & Hospital Association Receipt For:	Occupation Chief Finance Officer	-
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) Mr Dennis R Herrick		Date of Receipt
Mailing Address 1450 Redding		06 02 7 2009
City	State Zip Code	Transaction ID: 17240424
Birmingham  FEC ID number of contributing federal political committee.	MI 48009-1027	Amount of Each Receipt this Period 250.00
Name of Employer Beaumont Hospital - Royal Oak	Occupation Vice President and Chief Financial Off	-
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	I)	1250.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	for	e separate schedule(s) each category of the ailed Summary Page	FOR LINE NUMBER: PAGE 21 / 162 (check only one)    X
Any information copied from such Reports ar or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  American Hospital Association PAG	the name and address or	e sold or used by any perso f any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Charles Hoffman Mailing Address 2440 Antietam Driv	e		Date of Receipt
City Ann Arbor		p Code 8105-1471	Transaction ID: 17240426  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	Occupation		500.00
Name of Employer St. Joseph Mercy Hospital  Receipt For:  Primary  General  Other (specify) ▼	Chief Financial Aggregate Year-t		
Full Name (Last, First, Middle Initial) Mr. William Jackson Mailing Address 270 Turkey Run	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	State Zi	p Code	Transaction ID: 17240434
Charlevoix	MI 49	9720-9766	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		500.00
Name of Employer Charlevoix Area Hospital	Occupation President	_	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-ti	o-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. David B. Jahn			Date of Receipt
Mailing Address 3174 S. Woodfield Apt. 136		p Code	06 02 2009
City Sault Sainte Marie		р Code 9783-9432	Transaction ID: 17240435  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		600.00
Name of Employer War Memorial Hospital	Occupation Chief Executive		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-ti	o-Date ▼ 600.00	
SUBTOTAL of Receipts This Page (optional			1600.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 162 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any personal ename and address of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Spencer Johnson Mailing Address 2066 Riverwood Drive City Okemos FEC ID number of contributing federal political committee.  Name of Employer Michigan Health & Hospital Association Receipt For:	State Zip Code MI 48864-2814  C Occupation President	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify)  Full Name (Last, First, Middle Initial) Dr. Mark A Kelley	Aggregate Year-to-Date ▼ 1000.00	Date of Receipt
Mailing Address 1124 Covington Road  City  Bloomfield Hills  FEC ID number of contributing federal political committee.  Name of Employer	State Zip Code MI 48301-2363  C Occupation	Transaction ID: 17240441  Amount of Each Receipt this Period  500.00
Henry Ford Health System  Receipt For:  Primary General  Other (specify) ▼	Executive Vice President  Aggregate Year-to-Date ▼  500.00	
Full Name (Last, First, Middle Initial) Mr. Charles D. Kohlruss  Mailing Address 946 Meadow Lark Co	urt	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Holland  FEC ID number of contributing federal political committee.	State Zip Code MI 49424-6602  C	Transaction ID: 17240443  Amount of Each Receipt this Period  250.00
Name of Employer Holland Hospital  Receipt For:  Primary General  Other (specify) ▼	Occupation Vice President, Human Resources  Aggregate Year-to-Date   250.00	
SUBTOTAL of Receipts This Page (optional)		1750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 162 (check only one)  X 11a 11b 11c 12
	Statements may not be sold or used by any person the name and address of any political committee to see the name and address of any political committee to see the name and address of any political committee to see the name and address of any political committee to see the name and address of any political committee to see the name and address of any political committee to see the name and address of any political committee to see the name and address of any political committee to see the name and address of any political committee to see the name and address of any political committee to see the name and address of any political committee to see the name and address of any political committee to see the name and address of any political committee to see the name and address of any political committee to see the name and address of any political committee to see the name and address of any political committee to see the name and address of any political committee to see the name and address of any political committee to see the name and address of any political committee to see the name and address of any political committee the name and address of the name and the name	13 14 15 16 16 16 16 16 17 17 16 17 16 17 16 17 16 17 16 17 16 17 16 17 16 17 16 17 16 17 17 16 17 17 17 17 17 17 17 17 17 17 17 17 17
NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Dr. Mark D. Kolins, MD		Date of Receipt
Mailing Address 777 Overhill Road  City	State Zip Code	0 6 0 2 2 0 0 9  Transaction ID: 17240444
Bloomfield Village	MI 48301-2571	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Beaumont Hospital - Troy	Occupation Administrator	
Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. John M. Kosanovich, M.D.		Date of Receipt
Mailing Address 25 E. Hannum Blvd.		06 02 2009
City	State Zip Code	Transaction ID: 17240445
Saginaw	MI 48602-1937	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	400.00
Name of Employer Covenant Medical Center	Occupation Vice President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	400.00	
Full Name (Last, First, Middle Initial) Mr Dennis Krzeminski		Date of Receipt
Mailing Address 22526 Porter		06 02 2009
City	State Zip Code	Transaction ID: 17240453
<u>Novi</u>	MI 48374-3732	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	375.00
Name of Employer McLaren Health Care Corpo- ration	Occupation Senior Vice President and Chief Finan-	<u> </u>
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	
SUBTOTAL of Receipts This Page (optional)		1025.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 162 (check only one)    X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. James Kure Mailing Address 10140 Halsey Road  City Grand Blanc  FEC ID number of contributing federal political committee.  Name of Employer Genesys Health System  Receipt For: Primary General	State Zip Code MI 48439-8208  C  Occupation Director, Cardiology  Aggregate Year-to-Date   500.00	Date of Receipt  M M M D D D 2 2009  Transaction ID: 17240454  Amount of Each Receipt this Period  500.00
Full Name (Last, First, Middle Initial) Mr. Paul E. LaCasse, , DO Mailing Address 6520 Commerce Road City West Bloomfield FEC ID number of contributing federal political committee.  Name of Employer		Date of Receipt  M M M O D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify)  Full Name (Last, First, Middle Initial) Mr. Patrick Lamberti Mailing Address 54570 Coventry Lane	President & Chief Executive Officer  Aggregate Year-to-Date ▼  500.00	Date of Receipt
City Shelby Township FEC ID number of contributing federal political committee.	State Zip Code MI 48315-1620  C	Transaction ID: 17240457 Amount of Each Receipt this Period  500.00
Name of Employer POH Regional Medical Center Receipt For: Primary General Other (specify)	Occupation Chief Executive Officer Aggregate Year-to-Date  500.00	
SUBTOTAL of Receipts This Page (optional)		1500.00

A.

В.

C.

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 162 (check only one)  X 11a 11b 11c 12	
Any information copied from such Reports and State or for commercial purposes, other than using the r	atements may	not be sold or used by any person	n for the purpose of soliciting contributions solicit contributions from such committee.	
NAME OF COMMITTEE (In Full)  American Hospital Association PAC		,,		
Full Name (Last, First, Middle Initial)  Mr. Gregory R. Lane  Mailing Address 1596 South Hill Circle			Date of Receipt	
City	State	Zip Code	0 6 0 2 2 0 0 9  Transaction ID: 17240463	
Bloomfield	MI	48304-1121	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C		500.00	
Name of Employer McLaren Health Care Corpo- ration	Occupation Sr. Vice I	President		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00		
Full Name (Last, First, Middle Initial) Ms. Lori Latham			Date of Receipt	
Mailing Address 13630 Juniper Drive			06 02 7 2009	
City	State Zip Code		Transaction ID: 17240464	
Dewitt  FEC ID number of contributing federal political committee.	C	48820-9078	Amount of Each Receipt this Period 291.69	
Name of Employer Michigan Health & Hospital Association Receipt For:	Occupation Vice Pres Aggregate			
Primary General Other (specify) ▼		291.69		
Full Name (Last, First, Middle Initial) Mr. Jim Lee			Date of Receipt	
Mailing Address 803 Greenwich Drive			06 02 7 2009	
City Grand Ledge	State MI	Zip Code 48837-2411	Transaction ID: 17240466  Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	1 1 1 1 1	500.00	
Name of Employer Michigan Health & Hospital Association	Occupation VP, Data			
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00		
SUBTOTAL of Receipts This Page (optional)			1291.69	

TOTAL This Period (last page this line number only) ......

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>(</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 162 (check only one)    X
Any information copied from such Reports are or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  American Hospital Association PAG	the name and add	γ not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Gary LeRoy Mailing Address 4158 Quaker Hill D	rive		Date of Receipt
City Fort Gratiot	State MI	Zip Code 48059-4036	Transaction ID: 17240486  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer Port Huron Hospital	Occupation		300.00
Receipt For: Primary Other (specify)		t Hospital Administrator Year-to-Date  300.00	
Full Name (Last, First, Middle Initial) Ms. Marilyn Litka-Klein Mailing Address 16930 Pine Hollow	Drive		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 17240488
East Lansing	MI	48823-9664	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		388.50
Name of Employer Michigan Health & Hospital Association Receipt For:		tor, Health Finance	
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 388.50	
Full Name (Last, First, Middle Initial) Mr. Spencer Maidlow	<b>'</b>		Date of Receipt
Mailing Address 1447 North Harriso	n Street		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City	State	Zip Code	Transaction ID: 17240490
Saginaw FEC ID number of contributing federal political committee.	C	48602-4727	Amount of Each Receipt this Period 500.00
Name of Employer Covenant Medical Center	Occupation Presiden	n t and Chief Executive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	al)		1188.50

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS  Any information copied from such Reports are	Use separate schedule(s) for each category of the Detailed Summary Page  and Statements may not be sold or used by any person	FOR LINE NUMBER: PAGE 27 / 162  (check only one)    X
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  American Hospital Association PAC	the name and address of any political committee to s	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Rolland Mambourg, , M.D. Mailing Address 1690 Waterside Ct.		Date of Receipt
City	State Zip Code	06 02 2009
Ann Arbor	MI 48108-8578	Transaction ID: 17240523  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	300.00
Name of Employer St. Joseph Mercy Hospital	Occupation Vice President Physician Services	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial) Mr. David L. Marcellino		Date of Receipt
Mailing Address 41511 Thoreau Rid	ge	0 6 0 2 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17240524
Novi	MI 48377-2853	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Botsford Hospital	Occupation Corporate Vice President & CFO	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Kenneth J Matzick		Date of Receipt
Mailing Address 22500 Lavon		06 02 7 7 7 7 7
City	State Zip Code	Transaction ID: 17240526
Saint Clair Shores	MI 48081-2076	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer Beaumont Hospital - Royal Oak	Occupation President and Chief Executive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	al)	1050.00

TOTAL This Period (last page this line number only) .....

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 162 (check only one)    X   11a
An	for commercial purposes, other than using the	Statements may not be sold or used by any person ename and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
۸.	Full Name (Last, First, Middle Initial) Mr. Philip H McCorkle, , Jr.  Mailing Address 2000 Leff areas Address	05	Date of Receipt
	Mailing Address 200 Jefferson Avenue		06 02 2009
	City Grand Rapids	State Zip Code MI 49503-4502	Transaction ID: 17240527  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Saint Mary's Health Care	Occupation President and Chief Executive Officer	 r
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
 s.	Full Name (Last, First, Middle Initial) Ms. Nancy McKeague		Date of Receipt
	Mailing Address 627 N Harrison		06 02 2009
	City	State Zip Code	Transaction ID: 17240529
	East Lansing FEC ID number of contributing federal political committee.	MI 48823-3017	Amount of Each Receipt this Period 584.40
	Name of Employer Michigan Health & Hospital Association	Occupation Senior Vice President	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 584.40	]
	Full Name (Last, First, Middle Initial) Mr. A. Gary Muller		Date of Receipt
	Mailing Address 1246 Lakeshore Park	Place	06 02 7 9 9 9
	City	State Zip Code	Transaction ID: 17240532
	Marquette  FEC ID number of contributing federal political committee.	MI 49855	Amount of Each Receipt this Period  250.00
	Name of Employer Marquette General Health System	Occupation President & CEO	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	UDTOTAL (D Ti: D ( .: . l)		1334.40

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 162 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may not be sold or used by any persor g the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  American Hospital Association PA	AC .	
Full Name (Last, First, Middle Initial) Mr. Patrick Murtha		Date of Receipt
Mailing Address P O Box 659		06 02 7 2009
City Tawas City	State Zip Code MI 48764-0659	Transaction ID: 17240534
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  500.00
Name of Employer St. Joseph Health System	Occupation President and Chief Executive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Rodney M Nelson		Date of Receipt
Mailing Address 330 Gros Cap Roa	ad	06 02 7 2009
City	State Zip Code	Transaction ID: 17240535
Saint Ignace	MI 49781-9837	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Mackinac Straits Hospital and Health C	Occupation President and Chief Executive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Thomas Noren		Date of Receipt
Mailing Address 169 W Main Stree	t	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17240537
Marquette	MI 49855-9331	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Marquette General Health System	Occupation Chief Medical Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SURTOTAL of Receipts This Page (action	nal)	1000.00
	mber only)	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	for each category of the  Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 162 (check only one)  X 11a 11b 11c 12  13 14 15 16 1
or for commercial purposes, other than usin  NAME OF COMMITTEE (In Full)  American Hospital Association PA	and Statements may not be sold or used by any person g the name and address of any political committee to s	for the purpose of soliciting contributions olicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Mark S O'Halla	-	Date of Receipt
Mailing Address 1000 Harrington B	oulevard	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17240538
Mount Clemens	MI 48043-2920	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Mount Clemens Regional Me- dical Center	Occupation President and Chief Executive Officer	1
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Mr. Randall D Oostra, , FACHE		Date of Receipt
Mailing Address 21 Tremore Way		0 6 0 2 2 0 0 9
City	State Zip Code	Transaction ID: 17240592
Holland	OH 44870-6081	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer ProMedica Health System	Occupation President and COO	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Francine M. Padgett		Date of Receipt
Mailing Address 21 Hunter's Ridge		06 02 2009
City	State Zip Code	Transaction ID: 17240593
Saginaw	MI 48609-9318	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer MidMichigan Health	Occupation Controller	1
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (option	nal)	1250.00

TOTAL This Period (last page this line number only) .....

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 162 (check only one)    X   11a
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	statements may not be sold or used by any person ename and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American Hospital Association PAC		
۸.	Full Name (Last, First, Middle Initial)  Mr. Mark Pawlak  Mailing Address 15277 Meadowwood		Date of Receipt
		7: 0 1	06 02 2009
	City Grand Haven	State Zip Code MI 49417-9684	Transaction ID: 17240596  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Holland Hospital	Occupation Vice President	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
- 3.	Full Name (Last, First, Middle Initial) Mr. Wallace Strickland  Moiling Address 1214 18th Avanua		Date of Receipt
	Mailing Address 1314 19th Avenue		06 03 7 2009
	City Meridian	State Zip Code MS 39301-4116	Transaction ID: 17240599
	FEC ID number of contributing federal political committee.	MS 39301-4116	Amount of Each Receipt this Period  250.00
	Name of Employer Rush Health Systems	Occupation President and Chief Executive Officer	r
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	]
. –	Full Name (Last, First, Middle Initial) Mr. Gerald D Wages		Date of Receipt
	Mailing Address 830 S. Gloster Street		06 03 7 9 9 9
	City Tupelo	State Zip Code MS 38801-4996	Transaction ID: 17240600
	FEC ID number of contributing federal political committee.	MS 38801-4996	Amount of Each Receipt this Period  900.00
	Name of Employer North Mississippi Health Services, Inc	Occupation Interim President and Chief Executive	e
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 900.00	
Γ	SUBTOTAL of Receipts This Page (optional)		1400.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 / 162 (check only one)  X 11a 11b 11c 12
	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Claude W. Harbarger		Date of Receipt
Mailing Address 969 Lakeland Drive  City	State Zip Code	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Jackson	MS 39216-4606	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer St. Dominic-Jackson Memor- ial Hospital	Occupation President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Brian Peters		Date of Receipt
Mailing Address 3051 Crofton Dr.		06 02 7 2009
City	State Zip Code	Transaction ID: 17240608
<u>Dewitt</u>	MI 48820-7770	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	750.00
Name of Employer Michigan Health & Hospital Association	Occupation Senior Corporate Vice President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) Mr. William Peterson		Date of Receipt
Mailing Address 2665 Daleview Drive		06 02 7 2009
City	State Zip Code	Transaction ID: 17240609
Ann Arbor	MI 48105-9603	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	375.00
Name of Employer McLaren Health Care Corpo- ration	Occupation VP, Employee & Labor Relations	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	
OUDTOTAL ACROSS THE DOLLAR TO THE		1375.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 162 (check only one)    X
Any information copied from such Reports are or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  American Hospital Association PA	nd Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial)  Mr Steve Pirog  Mailing Address 2030 Hunters Run	NE	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City <u>A</u> da	State Zip Code MI 49301-9559	Transaction ID: 17240610  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Saint Mary's Health Care	Occupation Vice President Finance	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Andrea R. Price, , FACHE Mailing Address 2024 Timberview D	)r	Date of Receipt
		06 02 2009
City	State Zip Code	Transaction ID: 17240611
Okemos  FEC ID number of contributing federal political committee.	MI 48864-5998	Amount of Each Receipt this Period  375.00
Name of Employer Sparrow Hospital	Occupation Administrator	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) Mr. Sam W. Cameron		Date of Receipt
Mailing Address 28 Waterford Place	)	06 03 7 9 9 9
City	State Zip Code MS 39211-2945	Transaction ID: 17240614
Jackson FEC ID number of contributing federal political committee.	MS 39211-2945	Amount of Each Receipt this Period  2.50
Name of Employer Mississippi Hospital Asso- ciation	Occupation President & Chief Executive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 507.50	
		627.50

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 162 (check only one)  X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any pers the name and address of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. G. Douglas Higginbotham Mailing Address P O Box 607  City Laurel  FEC ID number of contributing federal political committee.  Name of Employer South Central Regional Medical Center Receipt For: Primary General Other (specify)	State Zip Code MS 39441-0607  C  Occupation Executive Director  Aggregate Year-to-Date  250.00	Date of Receipt  M M M D D D 2 0 0 9  Transaction ID: 17240622  Amount of Each Receipt this Period  250.00
Full Name (Last, First, Middle Initial) Ms. Kathy Peoples Mailing Address 5333 Elderberry Road City Noblesville FEC ID number of contributing federal political committee.  Name of Employer St. Joseph Hospital  Receipt For: Primary General Other (specify)	State Zip Code IN 46062-9317  C  Occupation V.P. Nursing  Aggregate Year-to-Date  250.00	Date of Receipt  M M M D D D 2 2 0 0 9  Transaction ID: 17240642  Amount of Each Receipt this Period  250.00
Full Name (Last, First, Middle Initial) Mr. Brian T Shockney Mailing Address 2745 N Indian Creek  City Logansport  FEC ID number of contributing federal political committee.  Name of Employer Memorial Hospital  Receipt For: Primary General Other (specify)	Road  State Zip Code IN 46947-8648  C  Occupation President and Chief Executive Office Aggregate Year-to-Date  250.00	Date of Receipt  M M M D D D 2 0 0 9  Transaction ID: 17240643  Amount of Each Receipt this Period  250.00
SUBTOTAL of Receipts This Page (optional)		750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 162 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements mand add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Vincent C. Caponi			Date of Receipt
Mailing Address 8166 Darnley Court  City	State	Zip Code	0 6 0 3 2 0 0 9  Transaction ID: 17240644
Indianapolis	IN	46260-2906	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		500.00
Name of Employer St. Vincent Health	Occupatio Hospital		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Dennis W Dawes, , FACHE Mailing Address 1000 E. Main St.			Date of Receipt
Maining Address 1000 E. Main St.			06 03 2009
City	State	Zip Code	Transaction ID: 17240645
<u>Danville</u>	IN	46122-1948	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Hendricks Regional Health	Occupatio Hospital	n President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Spencer L. Grover			Date of Receipt
Mailing Address 3636 Emily Way			06 03 7 2009
City	State	Zip Code	Transaction ID: 17240646
Carmel	IN	46033-4442	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Indiana Hospital Associat- ion	Occupatio Vice Pres	sident	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		_	1500.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate sched for each category of Detailed Summary	f the (Check only one)
Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by a name and address of any political co	y any person for the purpose of soliciting contributions mmittee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. David H. Wiesman Mailing Address 4521 Hickory Grove E  City Greenwood  FEC ID number of contributing federal political committee.  Name of Employer Indiana Hospital Association Receipt For: Primary General	State Zip Code IN 46143-7448  C  Occupation Vice President  Aggregate Year-to-Date	Date of Receipt  M M M D D D Z 2009  Transaction ID: 17240647  Amount of Each Receipt this Period  500.00
Other (specify) ▼  Full Name (Last, First, Middle Initial) Mr. Brian Tabor  Mailing Address 10762 Forest Lake Co  City  Indianapolis  FEC ID number of contributing federal political committee.  Name of Employer Indiana Hospital Associat-	0 0 0 0 0 0 0	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial)  Mr. lan G. Worden  Mailing Address 10749 King's Mill Dr.	Vice President of Governme  Aggregate Year-to-Date ▼  50	Date of Receipt  0.00  Date of Receipt  0.00  0.00  0.00  0.00
City Carmel	State Zip Code IN 46032-9467	Transaction ID: 17240649  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	550.00
Name of Employer St. Vincent Health	Occupation Chief Financial Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	0.00
SUBTOTAL of Receipts This Page (optional) .		1550.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for each category of the  Detailed Summary Page	FOR LINE NUMBER: PAGE 37 / 162 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  Ms. Diane M. Radloff  Mailing Address 3211 Governors Lane  City  Commerce Township  FEC ID number of contributing federal political committee.  Name of Employer St. John Health  Receipt For:  Primary General  Other (specify)	State Zip Code MI 48390-1233  C  Occupation Administrator  Aggregate Year-to-Date  250.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mrs. Donna J. Rapp  Mailing Address 2330 N Deer Valley  City Midland  FEC ID number of contributing federal political committee.  Name of Employer MidMichigan Health  Receipt For:  Primary General Other (specify)	State Zip Code MI 48642-8800  C  Occupation Vice President  Aggregate Year-to-Date  250.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Dr. Larry Rawsthorne, , M.D.  Mailing Address 2100 White Owl Way  City Okemos  FEC ID number of contributing federal political committee.  Name of Employer Sparrow Hospital  Receipt For: Primary General Other (specify)	State Zip Code MI 48864-5205  C  Occupation Senior Vice President Medical Affairs  Aggregate Year-to-Date  375.00	Date of Receipt  M M D D D 2 2 0 0 9  Transaction ID: 17240654  Amount of Each Receipt this Period  375.00
SUBTOTAL of Receipts This Page (optional)	· •	875.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 38 / 162   (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  American Hospital Association PAGE	C		
Full Name (Last, First, Middle Initial) Mr. Richard M Reynolds			Date of Receipt
Mailing Address 3467 N. Sunset Wa	ay		0 6 0 2 2 0 0 9
City Sanford	State MI	Zip Code	Transaction ID: 17240656
FEC ID number of contributing federal political committee.	C	48657-9583	Amount of Each Receipt this Period  500.00
Name of Employer MidMichigan Health	Occupation Presiden		
Receipt For:  Primary  General  Other (specify) ▼		e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Brian L. Rodgers			Date of Receipt
Mailing Address 3979 N. Perrine Ro	oad		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Midland	State MI	Zip Code 48642-8336	Transaction ID: 17240658
FEC ID number of contributing federal political committee.	C	40042-0330	Amount of Each Receipt this Period  250.00
Name of Employer MidMichigan Health	Occupation Senior V	n ice President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Gregory H. Rogers			Date of Receipt
Mailing Address 405 Hunters Ridge			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Midland	State MI	Zip Code 48640-2920	Transaction ID: 17240659
FEC ID number of contributing federal political committee.	C	40040-2920	Amount of Each Receipt this Period 375.00
Name of Employer MidMichigan Health	Occupation Manager		
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 375.00	
SUBTOTAL of Receipts This Page (optional	al)		1125.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 39 / 162 (check only one)  X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Barbara Rossmann Mailing Address 15855 19 Mile Road  City Clinton Township  FEC ID number of contributing federal political committee.  Name of Employer Henry Ford Health System  Receipt For: Primary General Other (specify)	State Zip Code MI 48038-3504  C  Occupation President and Chief Executive Officer Aggregate Year-to-Date  500.00	Date of Receipt  M M M D D D Z 2009  Transaction ID: 17240660  Amount of Each Receipt this Period  500.00
Full Name (Last, First, Middle Initial) Mr. Joseph J. Ruth Mailing Address 6480 Kernwood  City  East Lansing  FEC ID number of contributing federal political committee.  Name of Employer Sparrow Hospital  Receipt For:  Primary General Other (specify)	State Zip Code MI 48823-9432  C  Occupation Senior VP and Chief Strategy Officer Aggregate Year-to-Date  375.00	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: 17240661  Amount of Each Receipt this Period  375.00
Full Name (Last, First, Middle Initial) Ms. Nancy M Schlichting Mailing Address One Ford Place  City  Detroit  FEC ID number of contributing federal political committee.  Name of Employer Henry Ford Health System  Receipt For:  Primary General  Other (specify)	State Zip Code MI 48202-3450  C  Occupation President and Chief Executive Officer  Aggregate Year-to-Date  2500.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		3375.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 40 / 162 (check only one)    X   11a
Ai	ny information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
<u>∠</u> 4.	Full Name (Last, First, Middle Initial) Mrs. Elizabeth S. Schnettler Mailing Address 9120 Port Austin Road			Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Poy Port	State MI	Zip Code	Transaction ID: 17240664
	Bay Port  FEC ID number of contributing federal political committee.	C	48720-9770	Amount of Each Receipt this Period  250.00
	Name of Employer Hospital Council of East Central Michi Receipt For:  Primary General Other (specify) ▼	Occupation President Aggregate		]
В.	Full Name (Last, First, Middle Initial) Mr. Peter J. Schonfeld  Mailing Address 7105 Cutler Road			Date of Receipt  0 6 0 2 2 0 0 9
	City	State	Zip Code	Transaction ID: 17240667
	Bath	MI	48808-9439	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		583.38
	Name of Employer Michigan Health & Hospital Association Receipt For:  Primary  Other (specify) ▼	r '	n President, Policy & Data Svo Year-to-Date ▼ 583.38	os l
	Full Name (Last, First, Middle Initial) Mr. Michael R. Schwartz			Date of Receipt
	Mailing Address 582 Henrietta Street			06 / 02 / 7 7 7 7
	City	State	Zip Code	Transaction ID: 17240668
	Birmingham  FEC ID number of contributing federal political committee.	C	48009-1453	Amount of Each Receipt this Period  250.00
	Name of Employer Michigan Health & Hospital Association	Occupation Retired	n	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
	UBTOTAL of Receipts This Page (optional)			1083.38

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 162 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	tatements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
∠ <b>A.</b>	Full Name (Last, First, Middle Initial) Mr. James J Sexton Mailing Address 2333 Biddle Avenue	Stata	Zip Code	Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
	City Wyandotte	State MI	48192-4668	Transaction ID: 17240670  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40102 4000	250.00
	Name of Employer Henry Ford Health System  Receipt For:  Primary  General  Other (specify) ▼		n t and Chief Executive Officer Year-to-Date ▼ 250.00	
- В.	Full Name (Last, First, Middle Initial) Ms. Camille Shy Mailing Address 13200 Cambridge Cour	rt		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 17240676
	Plymouth	MI	48170-3099	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer St. Joseph Mercy Hospital	Occupation Vice Pres		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
- ).	Full Name (Last, First, Middle Initial) Mr. Dale Sowders			Date of Receipt
	Mailing Address 1093 Jill Louise Court			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 17240679
	<u>Holland</u>	MI	49424-5321	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Holland Hospital	Occupation Presiden	n t and Chief Executive Officer	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)			1000.00
Ī	TOTAL This Period (last page this line number of	only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 42 / 162 (check only one)    X
(	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements ma name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American Hospital Association PAC			
۹.	Full Name (Last, First, Middle Initial)  Mr. Paul A Spaude, , FACHE  Mailing Address 6354 East Bay Lane			Date of Receipt
	City	Ctata	7in Code	06 02 2009
	City Richland	State MI	Zip Code 49083-8707	Transaction ID: 17240680  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	43000 0707	600.00
	Name of Employer Borgess Health Alliance	Occupatio Presiden	on It and Chief Executive Office	r
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 600.00	
- 3.	Full Name (Last, First, Middle Initial) Mr. Randall Stasik			Date of Receipt
	Mailing Address 6538 S Evergreen Drive	9		06 02 2009
	City	State	Zip Code	Transaction ID: 17240684
	Newaygo	MI	49337-8196	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer Gerber Memorial Health Se- rvices	1	ecutive Officer	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
- ).	Full Name (Last, First, Middle Initial) Mr Terry L Steele			Date of Receipt
	Mailing Address 391 Troon Court			06 02 7 2009
	City	State	Zip Code	Transaction ID: 17240685
	Holland	MI	49423-8830	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Holland Hospital		sident Finance and Chief Fir	nan
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)			1350.00
	TOTAL This Period (last page this line number of		<u> </u>	

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s for each category of the Detailed Summary Page	(Crieck Grilly Grie)
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any name and address of any political commit	person for the purpose of soliciting contributions tee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Ray Stover Mailing Address 515 Quarter Street  City Gladwin  FEC ID number of contributing federal political committee.  Name of Employer MidMichigan Medical Cente-	State Zip Code MI 48624-1959  C Occupation	Date of Receipt  M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
r-Gladwin  Receipt For:  Primary General  Other (specify) ▼	Executive Vice President  Aggregate Year-to-Date ▼  600.00	
Full Name (Last, First, Middle Initial) Mr. Douglas Strong Mailing Address 1500 East Medical Cel	nter Drive	Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
City	State Zip Code	Transaction ID: 17240687
Ann Arbor FEC ID number of contributing federal political committee.	MI 48109-0999	Amount of Each Receipt this Period 500.00
Name of Employer University of Michigan Hospitals and H Receipt For:  Primary General	Occupation Chief Executive Officer Aggregate Year-to-Date ▼	
Under (specify) ▼  Full Name (Last, First, Middle Initial)  Mr. Dennis A Swan	500.00	Date of Receipt
Mailing Address 3741 Chippendale		M M / D D / Y Y Y Y Y O 6 0 2 2 0 0 9
City	State Zip Code	Transaction ID: 17240688
Okemos	MI 48864-3861	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Sparrow Hospital	Occupation President and Chief Executive O	fficer
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		1600.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	·)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 44/162   (check only one)     X   11a
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  American Hospital Association PAC		7.	
Full Name (Last, First, Middle Initial) Mr. Joseph R Swedish			Date of Receipt
Mailing Address 50767 Drakes Bay D	Orive		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Novi	State MI	Zip Code 48374-2546	Transaction ID: 17240690  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10074 2040	250.00
Name of Employer Trinity Health	Occupatio Presiden	n t and Chief Executive Office	
Receipt For:  Primary  General  Other (specify) ▼		e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Joseph M Tasse, , FACHE			Date of Receipt
Mailing Address 27351 Dequindre			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 17240691
Madison Heights  FEC ID number of contributing federal political committee.	C	48071-3487	Amount of Each Receipt this Period 250.00
Name of Employer St. John Macomb-Oakland	Occupatio	n	_
Hospital, Oakl	Presiden		
Receipt For:    Primary   General	Aggregate	e Year-to-Date	1
Other (specify) ▼	0 0	250.00	
Full Name (Last, First, Middle Initial) Mr. Mark R Taylor	1		Date of Receipt
Mailing Address 16 Dodge Place			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 17240692
Grosse Pointe	MI	48230-1939	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		500.00
Name of Employer Genesys Health System	Occupatio Presiden		
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		500.00	
			1000.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 45 / 162 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  American Hospital Association PAC	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial)  Mr. Kevin B. Tompkins  Mailing Address 8110 Cotswold Lane  City	State	Zip Code	Date of Receipt    M M   D D D   Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Clarkston  FEC ID number of contributing federal political committee.	C	48348-4363	Amount of Each Receipt this Period  375.00
Name of Employer McLaren Health Care Corporation Receipt For:  ☐ Primary General ☐ Other (specify) ▼	Occupation Vice Pres Aggregate		
Full Name (Last, First, Middle Initial) Mr. Stanley Tooley Mailing Address One Denso Road	'		Date of Receipt  M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City  Battle Creek  FEC ID number of contributing federal political committee.	State MI	Zip Code 49037-7313	Transaction ID: 17240694  Amount of Each Receipt this Period  250.00
Name of Employer Southwest Regional Rehabilitation Cent Receipt For:  Primary General Other (specify) ▼	<del>- ' '</del>	t and CEO Year-to-Date ▼ 250.00	]
Full Name (Last, First, Middle Initial) Mrs. Patti Van Dort  Mailing Address 2629 Floral Drive			Date of Receipt
City Zeeland FEC ID number of contributing federal political committee.	State MI	Zip Code 49464-9107	0 6 0 2 2 0 0 9  Transaction ID: 17240697  Amount of Each Receipt this Period  250.00
Name of Employer Holland Hospital  Receipt For:  Primary  General  Other (specify) ▼	Occupation VP Nursi Aggregate		1
SUBTOTAL of Receipts This Page (optional	)		875.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 46 / 162 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using the	Statements may not be sold or used by any person ne name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Alan Vanarsdal Mailing Address 6160 Fox Glen Drive		Date of Receipt
City	State Zip Code	0 6 0 2 2 0 0 9 Transaction ID: 17240698
Saginaw	MI 48638-4337	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Covenant Medical Center	Occupation Director, Human Resources	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Brook Ward		Date of Receipt
Mailing Address 26403 CR 375		06 02 7 2009
City	State Zip Code	Transaction ID: 17240700
<u>Mattawan</u>	MI 49071	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Bronson Healthcare Group, Inc.	Occupation Executive Director	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Mr. Patrick R Wardell		Date of Receipt
Mailing Address One Hurley Plaza		06 02 7 2009
City	State Zip Code	Transaction ID: 17240701
<u>Flint</u>	MI 48503-5902	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer Hurley Medical Center	Occupation President and Chief Executive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
CURTOTAL of Descripto This Reserve in 1		1050.00
SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number	<u> </u>	

SCHEDULE A (FEC For ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 47 / 162 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other that	ports and Statements may not be sold or used by any person using the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Associati	on PAC	
Full Name (Last, First, Middle Initi	<u> </u>	Date of Receipt
Mailing Address 1009 St. Jos	•	06 02 2009
City <u>Saint Jose</u> ph	State Zip Code MI 49085-2533	Transaction ID: 17240702  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Lakeland Regional Health System	Occupation President and Chief Executive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initi	al)	Date of Receipt
Mailing Address 1240 E. Mill	Street	06 02 2009
City	State Zip Code	Transaction ID: 17240703
Hastings  FEC ID number of contributing federal political committee.	MI 49058-9185	Amount of Each Receipt this Period 750.00
Name of Employer Michigan Health & Hospital Association	Occupation Associate Executive Director	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initi	al)	Date of Receipt
Mailing Address 32468 Sands	stone Ct.	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17240704
Farmington Hills  FEC ID number of contributing federal political committee.	MI 48334-4321	Amount of Each Receipt this Period  250.00
Name of Employer Oakwood Healthcare, Inc.	Occupation Chief Financial Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page	(optional)	1250.00
	ine number only)	

City State Zip Code Frankenmuth MI 48734-9304  FEC ID number of contributing federal political committee.  Name of Employer Covenant Medical Center  Receipt For: Primary General Other (Last, First, Middle Initial) Mr. Scott Wilkerson  Mailing Address 4094 Breakwater Dr.  City State Zip Code MI 48864-4410  FEC ID number of contributing federal political committee.  Name of Employer Sparrow Health System  Receipt For: Primary General Occupation President, Physicians Health Plan  Receipt For: Primary General Occupation President, Physicians Health Plan  Receipt For: Primary General Other (specify) ▼  Transaction ID: 17240706  Amount of Each Receipt this P  President, Physicians Health Plan  Receipt For: Primary General Other (specify) ▼  Transaction ID: 17240706  C.  City State Zip Code Amount of Each Receipt this P  President, Physicians Health Plan  Receipt For: Primary General Other (specify) ▼  Transaction ID: 17240706  Transaction ID: 17240706  Amount of Each Receipt this P  Date of Receipt  Mr. Samuel Yamin  Mailing Address 5532 Lakeview Dr.  City State Zip Code Bloomfield Mil 48302-2728  Amount of Each Receipt this P  FEC ID number of contributing federal political committee.  C City State Zip Code Mil 48302-2728  Amount of Each Receipt this P  PEC ID number of contributing federal political committee.  Name of Employer Beaumont Hospital - Royal Occupation Trustee  Name of Employer Beaumont Hospital - Royal Occupation Trustee  Name of Employer Beaumont Hospital - Royal Occupation Trustee  Name of Employer Beaumont Hospital - Royal Occupation Trustee	12 16 17	$\vdash$ $\vdash$ $\vdash$ $\vdash$ $\vdash$	Use separate schedule(s) for each category of the Detailed Summary Page	BX)	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	
Milling Address 555 Northview Drive  City State Zip Code	ibutions nmittee.	for the purpose of soliciting contributions olicit contributions from such committee.	y not be sold or used by any person dress of any political committee to	ng the name and add	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	
Primary General Other (specify) ▼ 350.00  Full Name (Last, First, Middle Initial)  Mr. Scott Wilkerson  Mailing Address 4094 Breakwater Dr.  City State Zip Code MI 48864-4410  FEC ID number of contributing federal political committee.  Name of Employer Sparrow Health System  President, Physicians Health Plan  Receipt For: Primary General Other (specify) ▼ 375.00  Full Name (Last, First, Middle Initial)  Mr. Samuel Yamin  Mailing Address 5532 Lakeview Dr.  City State Zip Code Transaction ID: 17240708  Bloomfield MI 48302-2728  FEC ID number of contributing federal political committee.  City State Zip Code Transaction ID: 17240708  Bloomfield MI 48302-2728  FEC ID number of contributing federal political committee.  Name of Employer Beaumont Hospital - Royal Oak Receipt For:  Name of Employer Beaumont Hospital - Royal Oak Receipt For:  Aggregate Year-to-Date ▼		Transaction ID: 17240705  Amount of Each Receipt this Period	48734-9304	State MI C Occupation	Mr. Tim Wenzel  Mailing Address 555 Northview Drive  City Frankenmuth  FEC ID number of contributing federal political committee.	Δ.
Mr. Scott Wilkerson Mailing Address 4094 Breakwater Dr.  City State Zip Code Okemos MI 48864-4410  FEC ID number of contributing federal political committee.  Name of Employer Sparrow Health System  Receipt For: Primary Other (specify)  Mailing Address 5532 Lakeview Dr.  City State Zip Code Transaction ID: 17240706  Amount of Each Receipt this P  Aggregate Year-to-Date ▼  Transaction ID: 17240706  Amount of Each Receipt this P  Date of Receipt  Min 48864-4410  Date of Receipt this P  Date of Receipt  Transaction ID: 17240708  Amount of Each Receipt this P  Date of Receipt  Min 48302-2728  Amount of Each Receipt this P  Transaction ID: 17240708  Amount of Each Receipt this P  City State Zip Code Min 48302-2728  FEC ID number of contributing federal political committee.  Name of Employer Beaumont Hospital - Royal Oak Receipt For: Aggregate Year-to-Date ▼			350.00	Aggregate	Primary General	_
Okemos MI 48864-4410  FEC ID number of contributing federal political committee.  Name of Employer Sparrow Health System  President, Physicians Health Plan  Receipt For: Primary General Other (specify) ▼  C. Mr. Samuel Yamin Mailing Address 5532 Lakeview Dr.  City State Zip Code MI 48302-2728  FEC ID number of contributing federal political committee.  PEC ID number of contributing federal political committee.  Name of Employer Beaumont Hospital - Royal Oak Receipt For: Aggregate Year-to-Date ▼  Date of Receipt  Transaction ID: 17240708  Amount of Each Receipt this P  C 21	<sup>Y</sup> 2009	M M / D D / Y Y Y Y		Dr.	Mr. Scott Wilkerson	В.
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Mr. Samuel Yamin Mailing Address 5532 Lakeview Dr.  City State Zip Code Bloomfield MI 48302-2728  FEC ID number of contributing federal political committee.  Name of Employer Beaumont Hospital - Royal Oak Receipt For:  Aggregate Year-to-Date ▼		Amount of Each Receipt this Period	on at, Physicians Health Plan	Occupation Presiden	Okemos  FEC ID number of contributing federal political committee.  Name of Employer Sparrow Health System	
Mr. Samuel Yamin  Mailing Address 5532 Lakeview Dr.  City  Bloomfield  FEC ID number of contributing federal political committee.  Name of Employer Beaumont Hospital - Royal Oak  Receipt For:  Date of Receipt  Transaction ID: 17240708  Amount of Each Receipt this P  C  C  Aggregate Year-to-Date ▼			1 1 1 1 1 1 1	Aggregate	Primary General	
Bloomfield  MI 48302-2728  Amount of Each Receipt this P  C  Name of Employer Beaumont Hospital - Royal Oak Receipt For:  Aggregate Year-to-Date ▼	<sup>Y</sup> 2 0 0 9	M M / D D / Y Y Y Y Y		· .	Mr. Samuel Yamin	- Э.
FEC ID number of contributing federal political committee.  Name of Employer Beaumont Hospital - Royal Oak Receipt For:  Aggregate Year-to-Date			•		•	
Oak Receipt For: Aggregate Year-to-Date ▼	250.00			С	FEC ID number of contributing	
				Trustee	Oak	
Other (specify) ▼ 250.00				Aggregate	Primary General	
SUBTOTAL of Receipts This Page (optional)	975.00	975.00	<b>)</b>	nal)	SUBTOTAL of Receipts This Page (optional)	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 49 / 162 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using	d Statements may not be sold or used by any persor the name and address of any political committee to	n for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)  American Hospital Association PAC	;	
Full Name (Last, First, Middle Initial)  Ms. Mary Zatina		Date of Receipt
Mailing Address 605 Chicago Boulev		0 6 D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Detroit	State Zip Code MI 48202-1414	Transaction ID: 17240709  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Oakwood Healthcare, Inc.	Occupation SVP, Gov't Rel, Corp Planning & Com	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial) Mr. Eric P Norwood		Date of Receipt
Mailing Address 2701 North Decatur	Road	06 / 02 / Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17240857
<u>Decatur</u>	GA 30033-5918	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer DeKalb Medical Center	Occupation President and Chief Executive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Gene B Wright		Date of Receipt
Mailing Address P O Box 1059		06 02 7 2009
City	State Zip Code	Transaction ID: 17240873
Thomaston	GA 30286-0027	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Upson Regional Medical Ce- nter	Occupation Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)	)	750.00
TOTAL This Period (last page this line numb	<u> </u>	

Any information copied from such Reports and State or for commercial purposes, other than using the national NAME OF COMMITTEE (In Full)  American Hospital Association PAC  Full Name (Last, First, Middle Initial)  Mr. James E. May  Mailing Address 731 Elm Ave.  City  Terrace Park	ements may not be sold or used by any person me and address of any political committee to s  State Zip Code	Date of Receipt
Mr. James E. May  Mailing Address 731 Elm Ave.  City	State Zip Code	M M / D D / Y Y Y Y
Morey Hospital Andorson	OH 45174-1203  C  Occupation  President & Chief Executive Officer  Aggregate Year-to-Date	Transaction ID: 17241379  Amount of Each Receipt this Period  250.00
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)	250.00	
Mercy Medical Center	State Zip Code OH 44708-2614  C Occupation	Date of Receipt    M M M
Receipt For:  Primary General  Other (specify) ▼	President and Chief Executive  Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial)  Ms. Mandy C Goble  Mailing Address 205 Palmer Avenue  City	State Zip Code	Date of Receipt    M   M   D   D   V   Y   Y   Y   Y   Y   Y   Y   Y   Y
Bellefontaine  FEC ID number of contributing federal political committee.	OH 43311-2298	Amount of Each Receipt this Period 250.00
Mary Rutan Hośpital	Occupation President and Chief Executive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	•	750.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate for each categ Detailed Sumr	ory of the	FOR LINE NUMBER: PAGE 51 / 162 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
A C	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or us name and address of any politic	sed by any person cal committee to s	for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
۷.	Full Name (Last, First, Middle Initial) Mr. Francisco J Perez, , FACHE			Date of Receipt
	Mailing Address 3965 Southern Boulev			06 03 7 2009
	City Dayton	State Zip Code OH 45429-1229	1	Transaction ID: 17242078  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Kettering Health Network	Occupation Network Chief Executive	e Officer	-
	Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼	250.00	
 3.	Full Name (Last, First, Middle Initial) Mr. Troy A. Tyner, DO	!		Date of Receipt
	Mailing Address 1181 Grand Portage T	raii		06 03 7 2009
	City Beavercreek	State Zip Code OH 45385		Transaction ID: 17242169
	FEC ID number of contributing federal political committee.	OH 45385	0	Amount of Each Receipt this Period 250.00
	Name of Employer Grandview Medical Center	Occupation Interim V.P. Medical Aff	airs	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	250.00	
 ;.	Full Name (Last, First, Middle Initial) Mr. J. Michael Horsley			Date of Receipt
	Mailing Address 8107 Henslow Court			06 05 YYYYY 06 05 2009
	City Montgomery	State Zip Code <b>AL</b> 36117-7475		Transaction ID: 17246154
	FEC ID number of contributing federal political committee.	C 30117-7473		Amount of Each Receipt this Period 1000.00
	Name of Employer Alabama Hospital Associat- ion	Occupation President and Chief Exe	ecutive Officer	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	1000.00	
	SUBTOTAL of Receipts This Page (optional)	<u> </u>		1500.00
	SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number		<u> </u>	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 52 / 162 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
A OI	ny information copied from such Reports and S for commercial purposes, other than using the	statements may not be sold or used by any persename and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
∠ <b>4</b> .	Full Name (Last, First, Middle Initial) Mr. Fredrick J. Jacobs		Date of Receipt
	Mailing Address 23 E. Delaware Avenu		06 05 7 2009
	City	State Zip Code	Transaction ID: 17246246
	Pennington FEC ID number of contributing federal political committee.	NJ 08534-2302	Amount of Each Receipt this Period  5.00
	Name of Employer New Jersey Hospital Assoc- iation	Occupation General Counsel	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 305.00	
— 3.	Full Name (Last, First, Middle Initial) Mr. Bruce Schwartz		Date of Receipt
	Mailing Address 39 Sheldon Street		06 05 2009
	City	State Zip Code	Transaction ID: 17248478
	Ardsley	NY 10502-2504	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Montefiore Medical Center	Occupation Executive Vice Chair Psychiatry	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
— ).	Full Name (Last, First, Middle Initial) Mr. Jack Ludmir		Date of Receipt
	Mailing Address 800 Spruce Street		06 05 7 2009
	City Philadelphia	State Zip Code	Transaction ID: 17248523
	FEC ID number of contributing federal political committee.	PA 19107-6130	Amount of Each Receipt this Period  350.00
	Name of Employer Pennsylvania Hospital	Occupation Chair, Obstetrics & Gynecology	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Г		1	855.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 53 / 162 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using the	Statements may not be sold or used by any personal ename and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial)  Ms. Patricia A. Warner, MPH		Date of Receipt
Mailing Address 1500 East Medical Ct D5202 MPB, Box 071		06 05 2009
City	State Zip Code	Transaction ID: 17248537
Ann Arbor	MI 48109-0001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer University of Michigan Ho- spitals and H	Occupation Assoc. Director and Administrator	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial) Mr. Michael K Winthrop		Date of Receipt
Mailing Address P O Box 8004		06 05 2009
City	State Zip Code	Transaction ID: 17248553
Bellevue	OH 44811-8004	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Bellevue Hospital	Occupation President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial) Mrs. Janet Stanek		Date of Receipt
Mailing Address 6755 SW Dancaster F	Road	06 05 2009
City	State Zip Code	Transaction ID: 17248558
<u>Topeka</u>	KS 66610-1412	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Stormont-Vail HealthCare	Occupation Sr. Vice President	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
SUBTOTAL of Receipts This Page (optional) .		1700.00
TOTAL This Period (last page this line number	·	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 54 / 162 (check only one)  X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may	not be sold or used by any person	n for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full)  American Hospital Association PAC		, , , , , , , , , , , , , , , , , ,	
Full Name (Last, First, Middle Initial) Mr. Richard Paul			Date of Receipt
Mailing Address 502 East Second Stre	eet		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 17248587
<u>Duluth</u>	MN	55805-1982	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		350.00
Name of Employer SMDC Medical Center	Occupation	n of Behavioral Health	
Receipt For:	<del></del>	Year-to-Date ▼	-
Primary General Other (specify) ▼	, iggi ogalo	350.00	]
Full Name (Last, First, Middle Initial) Mr. Fred Gattas, Jr.			Date of Receipt
Mailing Address 5000 Summer Ave.			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 17248589
<u>Memphis</u>	TN	38122-4335	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		350.00
Name of Employer St. Jude Children's Resea- rch Hospital	Occupation Trustee	ı	7
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. David R Lincoln			Date of Receipt
Mailing Address 420 Bedford Street			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 17248591
Lexington	MA	02420-1508	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		350.00
Name of Employer Covenant Health Systems, Inc.	Occupation Presiden	n t and Chief Executive Office	r
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	350.00	
SUBTOTAL of Receipts This Page (optional) .	1	<b>\</b>	1050.00

TOTAL This Period (last page this line number only) .....

SCHEDULE A (FE	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 55 / 162 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
Any information copied from or for commercial purposes.  NAME OF COMMITTEE American Hospital A	other than using the name and a (In Full)	ay not be sold or used by any pers ddress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
Full Name (Last, First, N Mr. J Alex Valdez, , JD Mailing Address PO  City Santa Fe  FEC ID number of contri	Box 2107 State NM	Zip Code 87504-2107	Date of Receipt  M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer St. Vincent Regional Me cal Center Receipt For:	e. Occupat	ion xecutive Officer te Year-to-Date ▼ 250.00	250.00
Full Name (Last, First, N Ms. Janet Carbary Mailing Address 2430			Date of Receipt  M M M D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Carlsbad  FEC ID number of contri federal political committe		Zip Code 88220-3553	Transaction ID: 17248623  Amount of Each Receipt this Period  250.00
Name of Employer Carlsbad Medical Cente  Receipt For: Primary Other (specify)	Cnief E	ion xecutive Officer tte Year-to-Date ▼ 250.00	
Full Name (Last, First, M Mr. Robert A Garcia Mailing Address PO	liddle Initial) Box 26666		Date of Receipt  0 6 0 5 2 0 0 9
City  Albuquerque  FEC ID number of contri		Zip Code 87125-6666	Transaction ID: 17248628  Amount of Each Receipt this Period  250.00
Name of Employer Presbyterian Healthcare Services	Occupat Vice Pr	esident	
Receipt For:  Primary  Other (specify) ▼	Aggrega	te Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts T	nis Page (optional)		750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 56 / 162 (check only one)  X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	statements may not be sold or used by any person r name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. David C. Gessel, J.D.  Mailing Address 2180 S. 1300 East #440  City SLC  FEC ID number of contributing federal political committee.  Name of Employer UHA, Utah Hospitals & Health Systems A  Receipt For:  Primary General Other (specify)	State Zip Code UT 84106-2813  C  Occupation Vice President, Government Relation Aggregate Year-to-Date  350.00	Date of Receipt  M M C D D C Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Brian A Gragnolati, , FACHE Mailing Address 4716 Chevy Chase Bo  City Chevy Chase  FEC ID number of contributing federal political committee.  Name of Employer Suburban Hospital  Receipt For: Primary General Other (specify)	ulevard  State Zip Code  MD 20814-1422  C  Occupation  President and Chief Executive Officer  Aggregate Year-to-Date ▼  255.00	Date of Receipt  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial)  Ms. Christine R Wray  Mailing Address 22302 Bretmar Drive  City  Leonardtown  FEC ID number of contributing federal political committee.  Name of Employer St. Mary's Hospital  Receipt For:  Primary General  Other (specify)	State Zip Code MD 20650-2228  C  Occupation President and Chief Executive Officer Aggregate Year-to-Date  510.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		1115.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	FOR LINE NUMBER: PAGE 57 / 162 (check only one)  X 11a 11b 11c 12 13 14 15 16 17	
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any persor name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial)  Mr. William L Anderson		Date of Receipt
Mailing Address 11175 Cicero Drive, Su		0 6 1 0 2 0 0 9
City <u>Alpharetta</u>	State Zip Code GA 30022-1166	Transaction ID: 17256406  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Regency Hospital Company	Occupation President and Chief Executive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Patricia M. Currie, FACHE		Date of Receipt
Mailing Address 2401 S 31st St		06 10 2009
City	State Zip Code	Transaction ID: 17256407
Temple	TX 76508-0001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Scott and White Memorial Hospital	Occupation Chief of Hospital Services	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Andrew L Wilson		Date of Receipt
Mailing Address 1308 Bayview Ct.		0 6 1 0 2 0 0 9
City	State Zip Code	Transaction ID: 17256408
Bismarck	ND 58504-7086	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer St. Alexius Medical Center	Occupation President and Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)	······	1500.00
TOTAL This Period (last page this line number	·	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 58 / 162   (check only one)
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may	y not be sold or used by any persedress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  American Hospital Association PAC		, , ,	
Full Name (Last, First, Middle Initial) Mr. Mitch Leupp			Date of Receipt
Mailing Address P O Box 399			0 6 1 0 2 0 0 9
City	State	Zip Code	Transaction ID: 17256409
Stanley  FEC ID number of contributing federal political committee.	ND C	58784-0399	Amount of Each Receipt this Period 435.00
Name of Employer Mountrail County Medical Center	Occupatio Administ		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 435.00	
Full Name (Last, First, Middle Initial) Ms. Kris A Doody, , R.N.			Date of Receipt
Mailing Address 163 Van Buren Road	d, Suite 1		06 10 2009
City Caribou	State ME	Zip Code 04736-3567	Transaction ID: 17256415  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	04760 0007	350.00
Name of Employer Cary Medical Center	Occupatio	n ecutive Officer	
Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Michael E Henze			Date of Receipt
Mailing Address 54 Hospital Drive			06 10 2009
City Osage Beach	State MO	Zip Code 65065-3050	Transaction ID: 17256426
FEC ID number of contributing federal political committee.	C	03003-3030	Amount of Each Receipt this Period  600.00
Name of Employer Lake Regional Health Syst- em	<del>-   '</del>	ecutive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 600.00	
SUBTOTAL of Receipts This Page (optional)	)		1385.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 59 / 162 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  American Hospital Association PAC	d Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Michael R. Dunaway Mailing Address 15081 Linden Lane  City Leawood	State Zip Code KS 66224-3412	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee.  Name of Employer Missouri Hospital Association Receipt For:  Primary General	Occupation Senior VP, Field Operations Aggregate Year-to-Date	350.00
Other (specify) ▼  Full Name (Last, First, Middle Initial)  Mr. Paul A Hanson  Mailing Address P O Box 1210	350.00	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City  Watertown  FEC ID number of contributing federal political committee.  Name of Employer Prairie Lakes Healthcare System  Receipt For:  Primary General  Other (specify)	State Zip Code SD 57201-6210  C  Occupation Chief Executive Officer  Aggregate Year-to-Date   500.00	Transaction ID: 17256469  Amount of Each Receipt this Period  500.00
Full Name (Last, First, Middle Initial) Mr. John T Porter  Mailing Address 3900 West Avera Discription Suite 301  City Sioux Falls  FEC ID number of contributing federal political committee.  Name of Employer Avera Health	State Zip Code SD 57108-5729  C  Occupation President and Chief Executive Officer	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	
SUBTOTAL of Receipts This Page (optional	)	1100.00

	LE A (FEC Form 3X) D RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 60 / 162 (check only one)    X
or for commer	on copied from such Reports and S cial purposes, other than using the COMMITTEE (In Full) n Hospital Association PAC	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Ms. Pamela Mailing Ad	(Last, First, Middle Initial) a J Rezac dress 501 Summit Avenue			Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
City		State	Zip Code	Transaction ID: 17256483
	mber of contributing itical committee.	SD	57078-3855	Amount of Each Receipt this Period  250.00
<u>al</u> Receipt Fo Prim		<del>, '                                     </del>	n President e Year-to-Date ▼ 250.00	
Mr. David F	(Last, First, Middle Initial) R. Hewett dress 5813 Tomar Road			Date of Receipt  0 6 1 0 2 0 0 9
City		State	Zip Code	Transaction ID: 17256498
Sioux Fa	lls	SD	57108-4661	Amount of Each Receipt this Period
	mber of contributing itical committee.	C		500.00
<u>althcare O</u>	ota Assoc. of He- rga		t & Chief Executive Officer	
Receipt Fo		Aggregate	e Year-to-Date ▼ 500.00	]
Full Name Ms. Kathlee	(Last, First, Middle Initial) en Dunn			Date of Receipt
Mailing Ad	dress 700 South Second Stre	eet		0 6 1 0 Y Y Y Y Y Y Y
City		State	Zip Code	Transaction ID: 17256503
<u>Springfie</u>	ld	<u>IL</u>	62704-2516	Amount of Each Receipt this Period
	mber of contributing itical committee.	C		1000.00
<u>tion</u>	spital Associa-		t VP, Gov't Relations	
Receipt Fo		Aggregate	e Year-to-Date ▼ 1000.00	
	of Receipts This Page (optional)	I		1750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 61 / 162 (check only one)  X 11a 11b 11c 12 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any person to name and address of any political committee to see the second se	for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Kevin R. England Mailing Address 1800 Grist Mill Drive City Springfield FEC ID number of contributing	State Zip Code IL 62711-8113	Date of Receipt  M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For:  Primary  Other (specify) ▼	Occupation Vice President, Business Developmen Aggregate Year-to-Date  800.00	
Full Name (Last, First, Middle Initial) Dr. Anil Godbole, MD., S.C. Mailing Address 1893 Mission Hills La	nne State Zip Code	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Northbrook  FEC ID number of contributing federal political committee.  Name of Employer	IL 60062-5760  C Occupation	Transaction ID: 17256521  Amount of Each Receipt this Period  250.00
Advocate Bethany Hospital  Receipt For: Primary General Other (specify)	Chairman, Dept. of Psychiatry  Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial) Mr. Forrest G Hester  Mailing Address Post Office Box 569		Date of Receipt  0 6 1 0 2 0 0 9
City <u>Lincoln</u> FEC ID number of contributing federal political committee.	State Zip Code IL 62656-0569  C	Transaction ID: 17256522  Amount of Each Receipt this Period  250.00
Name of Employer Abraham Lincoln Memorial Hospital	Occupation President and Chief Executive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·	1300.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 62 / 162 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. John Jurica, , M.D.  Mailing Address 350 North Wall Street  City  Kankakee  FEC ID number of contributing federal political committee.  Name of Employer Riverside Medical Center  Receipt For: Primary General	State Zip Code IL 60901-2901  C  Occupation Vice President Medical Affairs  Aggregate Year-to-Date	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Other (specify)  Full Name (Last, First, Middle Initial) Mr. Phillip M Kambic Mailing Address 350 North Wall Street  City	State Zip Code	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Kankakee  FEC ID number of contributing federal political committee.  Name of Employer Riverside Medical Center	IL 60901-2901  C Occupation	Amount of Each Receipt this Period  250.00
Receipt For: Primary General Other (specify)	Chief Executive Officer  Aggregate Year-to-Date ▼  250.00	]
Full Name (Last, First, Middle Initial) Mr. Michael T McManus Mailing Address 129 North Eighth Stre	et	Date of Receipt
City  East Saint Louis  FEC ID number of contributing	State Zip Code IL 62201-2917	Transaction ID: 17256538  Amount of Each Receipt this Period
federal political committee.  Name of Employer Kenneth Hall Regional Hospital	Occupation Chief Operating Officer	250.00
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional) .		750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 63 / 162 (check only one)  X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any perse e name and address of any political committee t	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Doug Rahn		Date of Receipt
Mailing Address 701 North First Street		06 10 2009
City	State Zip Code	Transaction ID: 17256541
Springfield	IL 62781-0001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Memorial Health System	Occupation Chief Operating Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Ms. Pat Shehorn	1	Date of Receipt
Mailing Address 1225 W. Lake Street		0 6 1 0 2 0 0 9
City	State Zip Code	Transaction ID: 17256544
Melrose Park	IL 60160	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Westlake Hospital	Occupation Chief Executive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Mr Paul M Teodo		Date of Receipt
Mailing Address 852 West Street		0 6 1 0 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17256545
<u>Naperville</u>	IL 60540-6400	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Linden Oaks Hospital at Edward	Occupation Chief Operating Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional) .	1	1500.00

TOTAL This Period (last page this line number only) .....

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 64 / 162 (check only one)  X 11a 11b 11c 12
	Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
2	American Hospital Association PAC  Full Name (Last, First, Middle Initial)			
Δ.	Mr. Harry Wolin  Mailing Address P O Box 530			Date of Receipt  0 6 1 0 2 0 0 9
	City <u>Havana</u>	State IL	Zip Code 62644-0530	Transaction ID: 17256546  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		800.00
	Name of Employer Mason District Hospital	Occupation Administration	n trator and Chief Executive Of	fi
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 800.00	
- 3.	Full Name (Last, First, Middle Initial) Mr. Dan J Woods			Date of Receipt
	Mailing Address 503 N. Maple			06 10 7 2009
	City Effingham	State	Zip Code 62401	Transaction ID: 17256547
	FEC ID number of contributing federal political committee.	C	02401	Amount of Each Receipt this Period  800.00
	Name of Employer St. Anthony's Memorial Ho- spital	Occupation Executiv	<sub>n</sub> e Vice President and Adminis	str
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date  800.00	
- ).	Full Name (Last, First, Middle Initial) Mr. Edward M Goldberg	_		Date of Receipt
	Mailing Address 1555 Barrington Road	i		06 10 / Y Y Y Y Y Y Y
	City Hoffman Estates	State IL	Zip Code 60194-1018	Transaction ID: 17256559  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00134-1010	1000.00
	Name of Employer St. Alexius Medical Center	Occupation Presiden	n it and Chief Executive Officer	
	Receipt For:  Primary  General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
	SUBTOTAL of Receipts This Page (optional) .			2600.00
Ī	TOTAL This Period (last page this line number	r only)	<b>&gt;</b>	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 65 / 162 (check only one)  X 11a 11b 11c 12
Any information copied from such Reports an or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  American Hospital Association PAC	the name and add	not be sold or used by any person ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Thomasine Kennedy  Mailing Address 2714 N.D. 41 & 50  City Chinquapin  FEC ID number of contributing federal political committee.	State NC	Zip Code 28521	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Duplin General Hospital  Receipt For:  Primary  General  Other (specify) ▼	Occupation Board Ch Aggregate		
Full Name (Last, First, Middle Initial) Mr. James Butter, III Mailing Address 1476 Stonegate Lar	ne		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 17257993
East Lansing	MI	48823-2172	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		350.00
Name of Employer Sparrow Hospital	Occupation Vice Chai		
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Joseph M. Krella, FACHE	•		Date of Receipt
Mailing Address 15174 Amber Crest	Lane		06 11 2009
City	State	Zip Code	Transaction ID: 17257994
Draper FEC ID number of contributing federal political committee.	C	84020-5528	Amount of Each Receipt this Period 350.00
Name of Employer UHA, Utah Hospitals & Hea- Ith Systems A Receipt For:	Occupation President	_	
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optiona	)		1050.00

Any information copied from such Reports and		Detailed Summary Page	X 11a   11b   11c   12
or for commercial nurnocon other than using th	Statements may	not be sold or used by any perso	n for the purpose of soliciting contributions
or for commercial purposes, other than using tr	ne name and add	ress of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Ms. Virginia Blair			Date of Receipt
Mailing Address 4109 Plymbridge Lan	ne		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 17258005
Woodbridge	VA	22192-5133	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		350.00
Name of Employer Prince William Hospital	Occupation Vice Pres		
Receipt For:		Year-to-Date ▼	-
Primary General	, iggi egate		1
Other (specify) ▼	0 0	350.00	
Full Name (Last, First, Middle Initial) Mr. Harry F. Byrd, III	•		Date of Receipt
Mailing Address P.O. Box 3340			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 17258008
Winchester	VA	22604-2540	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		350.00
Name of Employer Valley Health System	Occupation Trustee	1	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Ms. Rosemary C Check			Date of Receipt
Mailing Address 4770 Kempsville Gre	ens Parkway		0 6 1 1 2 0 0 9
City	State	Zip Code	Transaction ID: 17258013
Virginia Beach	VA	23462-6412	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		350.00
Name of Employer Sentara Obici Hospital	Occupation Vice Pres	ident and Administrator	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼	30 0	350.00	
SUBTOTAL of Receipts This Page (optional)			1050.00

TOTAL This Period (last page this line number only) .....

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 67 / 162 (check only one)    X   11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any perse name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Stephen Cumbie Mailing Address 837 Mackall Drive  City McLean  FEC ID number of contributing federal political committee.	State Zip Code VA 22101-1615	Date of Receipt    M M
Name of Employer Inova Health System  Receipt For:  Primary General Other (specify) ▼	Occupation Manager & Trustee  Aggregate Year-to-Date   350.00	]
Full Name (Last, First, Middle Initial) Mr. Ramon Darcey  Mailing Address 535 Independence Pa Suite 200  City	rkway State Zip Code	Date of Receipt    M M M
Chesapeake FEC ID number of contributing federal political committee.	VA 23320-5176	Amount of Each Receipt this Period  350.00
Name of Employer Sentara Healthcare  Receipt For:  Primary  General  Other (specify) ▼	Occupation Vice President  Aggregate Year-to-Date   350.00	
Full Name (Last, First, Middle Initial) Mr. John Degruttola Mailing Address 6015 Poplar Hall Drive	9	Date of Receipt
City Norfolk FEC ID number of contributing	State Zip Code VA 23502-3819	Transaction ID: 17258017  Amount of Each Receipt this Period
federal political committee.  Name of Employer Sentara Healthcare	Occupation SVP, Sales and Marketing	350.00
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  350.00	
SUBTOTAL of Receipts This Page (optional)		1050.00

SCHEDULE A (FEC FITEMIZED RECEIPTS	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 68 / 162 (check only one)    X
Any information copied from such or for commercial purposes, other NAME OF COMMITTEE (In It American Hospital Associations)	r than using the name and add -ull)	not be sold or used by any persiress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Mr. David Goldberg  Mailing Address 5909 Wa	,		Date of Receipt
City Haymarket	State VA	Zip Code 20169-3301	Transaction ID: 17258019  Amount of Each Receipt this Period
FEC ID number of contributin federal political committee.		20103-0301	350.00
Name of Employer Inova Loudoun Hospital Receipt For:	Occupation Vice Pres		
Primary Gener Other (specify) ▼		350.00	
Full Name (Last, First, Middle Mr. Brian Gradle Mailing Address 400 Grea			Date of Receipt
City	State	Zip Code	0 6 1 1 2 0 0 9  Transaction ID: 17258020
Falls Church  FEC ID number of contributin federal political committee.	VA C	22046-2608	Amount of Each Receipt this Period 350.00
Name of Employer Bon Secours-Richmond Com unity Hospita	T V P COIPC	orate	
Receipt For:  Primary Gener  Other (specify) ▼	00 0	Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Mr. Dougal Hewitt	Initial)		Date of Receipt
Mailing Address 8260 Atle	e Road		06 11 2009
City	State	Zip Code	Transaction ID: 17258021
Mechanicsville FEC ID number of contributin federal political committee.	VA C	23116-1844	Amount of Each Receipt this Period 350.00
Name of Employer Memorial Regional Medical Center	Occupation Vice Pres		
Receipt For:  Primary Gener  Other (specify) ▼		Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This P	age (optional)		1050.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 69 / 162 (check only one)  X 11a 11b 11c 12
Any information copied from such Reports or for commercial purposes, other than usi  NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persong the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association P	AC	
Full Name (Last, First, Middle Initial)  Mr. Christopher O'Brien  Mailing Address 1701 North Georg	go Mooon Drivo	Date of Receipt
City	State Zip Code	0 6 1 1 1 2 0 0 9 Transaction ID: 17258056
Arlington	VA 22205-3610	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Virginia Hospital Center - Arlington	Occupation Vice President, Physician Services	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Jeffrey Pearson Mailing Address 1500 Namb 20th 1	Chrost	Date of Receipt
Mailing Address 1500 North 28th	State Zip Code	06 11 20005
City <u>Richmond</u>	VA 23223-5332	Transaction ID: 17258057
FEC ID number of contributing federal political committee.	C 23223-3332	Amount of Each Receipt this Period  350.00
Name of Employer Bon Secours-Richmond Comm- unity Hospita	Occupation VP Information Services	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. J Knox Singleton		Date of Receipt
Mailing Address 8110 Gatehouse		06 11 2009
City Falls Church	State Zip Code VA 22042-1210	Transaction ID: 17258058  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Inova Health System	Occupation President and Chief Executive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (option	nal)	1050.00
TOTAL This Period (last page this line nu	umber only)	

SCHEDULE A	(FEC Form 3X) CEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 70 / 162 (check only one)    X
or for commercial purp	oses, other than using the nam	ments may ne and addr	not be sold or used by any perso less of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, Fi Mr. Michael Taylor Mailing Address	st, Middle Initial) 533 Kings Grant Road			Date of Receipt  0 6 1 1 2 0 0 9
City		State	Zip Code	Transaction ID: 17258074
Virginia Beach FEC ID number of federal political com		C	23452-7051	Amount of Each Receipt this Period 350.00
Name of Employer Sentara Healthcare Receipt For:		Occupation Vice Presi	dent	
Primary Other (specif	General	Aggregate	Year-to-Date ▼ 350.00	
Full Name (Last, Fi Mr. Christopher How Mailing Address	ard			Date of Receipt  0 6 1 2 2 0 0 9
City		State	Zip Code	Transaction ID: 17259838
Oklahoma City FEC ID number of federal political con		OK C	73101-0205	Amount of Each Receipt this Period 500.00
Name of Employer SSM Health Care of ma	f Oklaho-	Occupation President		7
Receipt For: Primary Other (specif	General	Aggregate `	Year-to-Date ▼ 500.00	
Full Name (Last, Fi Ms. Karen Reynolds	rst, Middle Initial)			Date of Receipt
Mailing Address	O Box 1207			06 11 2009
City		State	Zip Code	Transaction ID: 17259839
Miami FEC ID number of federal political con		OK C	74355-1207	Amount of Each Receipt this Period 250.00
Name of Employer Integris Marshall C Medical Cente			cutive Officer	
Receipt For: Primary Other (specif	General	Aggregate `	Year-to-Date ▼ 250.00	
SUBTOTAL of Recei	ots This Page (optional)			1100.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Χ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE /1 / 162   (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may	y not be sold or used by any persedress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  American Hospital Association PAC		area or any ponioa committee to	
Full Name (Last, First, Middle Initial) Mr. J. Thornton Kirby			Date of Receipt
Mailing Address 1000 Center Point F	Road		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Columbia	State SC	Zip Code 29210-5802	Transaction ID: 17263966  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	29210-3002	500.00
Name of Employer South Carolina Hospital Association Receipt For:  Primary General Other (specify) ▼	Occupation Presiden Aggregate		
Full Name (Last, First, Middle Initial) Mr. Robert L. L Harman Mailing Address HC 84, Box 26	•		Date of Receipt  0 6 1 5 2 0 0 9
City	State	Zip Code	Transaction ID: 17265329
<u>Lahmansville</u>	WV	26731-9701	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Grant Memorial Hospital	Occupation Chief Exe	n ecutive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. David J Robertson			Date of Receipt
Mailing Address 2052 Iron Bridge Ci	ircle		0 6 1 5 2 0 0 9
City Morgantown	State WV	Zip Code 26508-8064	Transaction ID: 17265331
FEC ID number of contributing federal political committee.	C	20300-0004	Amount of Each Receipt this Period 500.00
Name of Employer Monongalia General Hospit- al	Occupation Presiden		
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	al)		1250.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 72 / 162 (check only one)    X
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  American Hospital Association PA	nd Statements may not be sold or used by any pers g the name and address of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. James I Miller Mailing Address 77 Pringle Way		Date of Receipt
City Reno FEC ID number of contributing	State Zip Code NV 89502-1474	Transaction ID: 17265524  Amount of Each Receipt this Period
Receipt For:  Primary  Other (specify)	Occupation President and Chief Executive Office Aggregate Year-to-Date ▼  500.00	500.00 er
Full Name (Last, First, Middle Initial) Mr. Brad Smith Mailing Address 1986 N. Ft. Wayne	Road	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Rushville FEC ID number of contributing federal political committee.	State         Zip Code           IN         46173-7559	Transaction ID: 17267469  Amount of Each Receipt this Period  350.00
Name of Employer Rush Memorial Hospital  Receipt For:  Primary General  Other (specify) ▼	Occupation Chief Executive Officer  Aggregate Year-to-Date   350.00	
Full Name (Last, First, Middle Initial) Dr. Peter L Slavin, , M.D.  Mailing Address 55 Fruit Street		Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
City  Boston  FEC ID number of contributing federal political committee.	State Zip Code MA 02114-2622  C	Transaction ID: 17267474  Amount of Each Receipt this Period  500.00
Name of Employer Massachusetts General Hospital Receipt For:  Primary General Other (specify) ▼	Occupation President  Aggregate Year-to-Date ▼  500.00	
SUBTOTAL of Receipts This Page (optional	al)	1350.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 73 / 162 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any persor e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial)  Ms. Cynthia Kreutz		Date of Receipt
Mailing Address 900 Potomac Street	State Zip Code	0 6 1 5 2 0 0 9 2 0 0 9
City <u>Aurora</u>	CO 80011-6716	Transaction ID: 17267481  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Spalding Rehabilitation Hospital Receipt For:  Primary General Other (specify) ▼	Occupation President and Chief Executive Officer  Aggregate Year-to-Date  1000.00	
Full Name (Last, First, Middle Initial) Mr. Carl Josehart		Date of Receipt
Mailing Address 1333 Moursund Street		06 15 2009
City	State Zip Code	Transaction ID: 17267584
Houston	TX 77030-3405	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Memorial Hermann-The Inst- itute for Reh	Occupation Chief Executive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Robert Reid, , M.D.		Date of Receipt
Mailing Address P O Box 689		06 15 2009
City	State Zip Code	Transaction ID: 17267595
Santa Barbara	CA 93102-0689	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Cottage Health System	Occupation Director Medical Affairs	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		2000.00
TOTAL This Period (last page this line number	<u> </u>	

Mailing Address 4114 Edgewater Drive  City State Zip Code Ames IA 50010-4192  FEC ID number of contributing federal political committee.  Name of Employer Mary Greeley Medical Center Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  Primary State Zip Code Transaction ID: 17267601  Amount of Each Receipt this Period  C Soupation Trustee  Aggregate Year-to-Date ▼  500.00		SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 74 / 162 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Full Name (Last, First, Middle Initial)  Ms. Mary Kitchell  Mailing Address 4114 Edgewater Drive  City  State Zip Code Amss  IA 50010-4192  FEC ID number of contributing federal political committee.  Name of Employer Primary General Other (specify) ▼  State Zip Code Amount of Each Receipt this Period  C Secupation Trustate  FUll Name (Last, First, Middle Initial)  Ms. Kimberly McNally Mailing Address 3300 Meridian Avenue N.  City  State Zip Code Primary General Other (specify) ▼  State Zip Code Transaction ID: 17267660  Amount of Each Receipt this Period  Date of Receipt  Trustate  FUll Name (Last, First, Middle Initial)  Ms. Kimberly McNally Mailing Address 3300 Meridian Avenue N.  City  State Zip Code WA 98103-9150  FEC ID number of contributing federal political committee.  Name of Employer Harbon-New Medical Center Harbon-New Medical Center Mailing Address 183rd Street and Third Avenue  C State Zip Code  Transaction ID: 17267660  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17267660  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17267660  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17267660  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17267660  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17267660  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17267678  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17267678  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17267678  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17267678  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17267678  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17267678  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17267678  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17267678  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 1	7	or for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
A. Me. Mary Kitchell  Mailing Address 4114 Edgewater Drive  City  State Zip Code Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer Primary General Other (specify) ▼  State Zip Code Trustee  Receipt For: Primary General Other (specify) ▼  State Zip Code Trustee  Receipt For: Primary General Other (specify) ▼  State Zip Code Trustee  Receipt For: Primary General Other (specify) ▼  State Zip Code Trustee  Trustee  Receipt For: Primary General Other (specify) ▼  State Zip Code Trustee  Trustee  Trustee  Receipt For: Primary General Other (specify) ▼  Date of Receipt  Amount of Each Receipt this Period  Date of Receipt  Amount of Each Receipt this Period  Date of Receipt  Amount of Each Receipt this Period  Date of Receipt  Trustee  Trustee  Receipt For: Primary General Other (specify) ▼  Other (specify) ▼  Date of Receipt  Date of Receipt  Trustee  Trustee  Trustee  Trustee  Trustee  Receipt For: Primary General Other (specify) ▼  Date of Receipt  Date of Receipt  Trustee  Trustee  Trustee  Trustee  Trustee  Trustee  Trustee  Receipt For: Aggregate Year-to-Date ▼  Date of Receipt  Date		American Hospital Association PAC			
City Ames IA 50010-4192  FEC ID number of contributing federal political committee.  Name of Employer Mary Greeley Medical Center Political Committee  Receipt For: Primary General Other (specify) ▼  State Zip Code Maring Address 3300 Meridian Avenue N.  City Seattle WA 98103-9150  FEC ID number of contributing federal political committee.  C  Name of Employer Mailing Address 3300 Meridian Avenue N.  City Seattle WA 98103-9150  FEC ID number of contributing federal political committee.  C  Primary General Other (specify) ▼  State Zip Code WA 98103-9150  FEC ID number of contributing federal political committee.  C  City State Zip Code Manager  Feceipt For: Primary General Other (specify) ▼  State Zip Code 1000.00  Transaction ID: 17267660  Amount of Each Receipt this Period  Amount of Each Receipt this Period  Transaction ID: 17267678  Transaction ID: 17267678  Amount of Each Receipt mis Period  C  Transaction ID: 17267678  Amount of Each Receipt mis Period  C  Transaction ID: 17267678  Amount of Each Receipt mis Period  Amount of Each Receipt mis Pe	۹.	Ms. Mary Kitchell			Date of Receipt
Ames IA 50010-4192  FEC ID number of contributing federal political committee.  Name of Employer Mary Greetey Medical Center Primary General Other (specify) ▼ 500.00  Full Name (Last, First, Middle Initial)  Ms. Kimberly McNally  Mailing Address 3300 Meridian Avenue N.  City State Zip Code WA 98103-9150  FEC ID number of contributing federal political committee.  Name of Employer Harborview Medical Center Manager  Receipt For: Occupation Manager  Receipt For: Primary General Other (specify) ▼ 1000.00  Full Name (Last, First, Middle Initial)  D. Scott Cooper Mailing Address 183rd Street and Third Avenue  City State Zip Code Manager  Receipt For: Aggregate Year-to-Date ▼ 1000.00  Date of Receipt Manager  Amount of Each Receipt this Period Transaction ID: 17267660  Amount of Each Receipt this Period Transaction ID: 172676760  Amount of Each Receipt this Period Transaction ID: 172676778  Amount of Each Receipt this Period Transaction ID: 17267678  Amount of Each Receipt this Period Transaction ID: 17267678  Amount of Each Receipt this Period Transaction ID: 17267678  Amount of Each Receipt this Period Transaction ID: 17267678  Amount of Each Receipt this Period Transaction ID: 17267678  Amount of Each Receipt this Period Transaction ID: 17267678  Amount of Each Receipt this Period Transaction ID: 17267678  Amount of Each Receipt this Period Transaction ID: 17267678  Amount of Each Receipt this Period Transaction ID: 17267678  Amount of Each Receipt this Period Transaction ID: 17267678  Amount of Each Receipt this Period Transaction ID: 17267678  Amount of Each Receipt this Period Transaction ID: 17267678  Amount of Each Receipt this Period Transaction ID: 17267678  Amount of Each Receipt this Period Transaction ID: 17267678  Amount of Each Receipt this Period Transaction ID: 17267678  Amount of Each Receipt This Period Transaction ID: 17267678  Amount of Each Receipt This Period Transaction ID: 17267678  Amount of Each Receipt This Period Transaction ID: 17267678  Amount of Each Receipt This Period Transaction ID:			Chaha	7:- Oada	06 15 2009
FEC ID number of contributing federal political committee.  Name of Employer Harboriew Medical Center Primary General Other (specify) ▼				•	
Receipt For:		FEC ID number of contributing		30010-4192	
Primary General Other (specify) ▼ 500.00  Full Name (Last, First, Middle Initial) Ma. Kimberly McNally Mailing Address 3300 Meridian Avenue N.  City Seattle WA 98103-9150  FEC ID number of contributing federal political committee.  Name of Employer Harborview Medical Center Manager Harborview Medical Center Aggregate Year-to-Date ▼ 1000.00  Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address 183rd Street and Third Avenue  City State Zip Code Mailing Address 183rd Street and Third Avenue  City State Zip Code Mailing Address 183rd Street and Third Avenue  City State Zip Code Bronx Ny 10457-9998  FEC ID number of contributing federal political committee.  Name of Employer St. Barmabas Hospital  City State Zip Code Bronx Ny 10457-9998  FEC ID number of contributing federal political committee.  Name of Employer St. Barmabas Hospital  City State Zip Code Name of Employer St. Barmabas Hospital  City State Zip Code Name of Employer St. Barmabas Hospital  City State Zip Code Name of Employer St. Barmabas Hospital  City State Zip Code Name of Employer St. Barmabas Hospital  City State Zip Code Name of Employer St. Barmabas Hospital  City State Zip Code Name of Employer St. Barmabas Hospital  City State Zip Code Name of Employer St. Barmabas Hospital  City State Zip Code Name of Employer St. Barmabas Hospital  City State Zip Code Name of Employer St. Barmabas Hospital  City State Zip Code Name of Employer St. Barmabas Hospital  City State Zip Code Name of Employer St. Barmabas Hospital  City State Zip Code Name of Employer Name of Employer State Zip Code Name of Employer Name of Employer State Zip Code Name of Employer Stat		Name of Employer Mary Greeley Medical Cent-		n	
Other (specify) ▼  Full Name (Last, First, Middle Initial)  Ms. Kimberly McNally  Mailing Address 3300 Meridian Avenue N.  City Seattle WA 98103-9150  FEC ID number of contributing federal political committee.  Name of Employer Harborview Medical Center Manager  Receipt For: Or. Scott Cooper Mailing Address 183rd Street and Third Avenue  City State  State  City State  Aggregate Year-to-Date  Date of Receipt  Mo 6 15 2009  Transaction ID: 17267660  Amount of Each Receipt this Period  Date of Receipt  Mo 6 15 12000  Date of Receipt  Tono.000  Date of Receipt  Mo 6 15 2009  Transaction ID: 17267678  Transaction ID: 17267678  Amount of Each Receipt this Period  Date of Receipt  Mo 6 15 15 12000  Transaction ID: 17267678  Amount of Each Receipt this Period  City State Date of Receipt  Mo 6 15 15 12000  Transaction ID: 17267678  Amount of Each Receipt this Period  Transaction ID: 17267678  Amount of Each Receipt this Period  CEO  Receipt For: Primary Other (specify) ▼  Aggregate Year-to-Date ▼  Other (specify) ▼  Aggregate Year-to-Date ▼  Primary Other (specify) ▼  Aggregate Year-to-Date ▼			Aggregate	e Year-to-Date ▼	
Mailing Address 3300 Meridian Avenue N.  City Seattle WA 98103-9150  FEC ID number of contributing federal political committee.  Name of Employer Mailing Address 183rd Street and Third Avenue  City State Zip Code WA 98103-9150  Aggregate Year-to-Date  Full Name (Last, First, Middle Initial) Dr. Scott Cooper Mailing Address 183rd Street and Third Avenue  City Bronx NY 10457-9998  FEC ID number of contributing federal political committee.  Cocupation Manager  Date of Receipt  Transaction ID: 17267660  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17267660  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17267678  Amount of Each Receipt  Mailing Address 183rd Street and Third Avenue  City Bronx NY 10457-9998  FEC ID number of contributing federal political committee.  Name of Employer St. Barnabas Hospital  CEO  Receipt For:  Aggregate Year-to-Date				500.00	
City Seattle WA 98103-9150  FEC ID number of contributing federal political committee.  Name of Employer Harborview Medical Center  Receipt For: Primary Other (specify)  FEC ID number of contributing federal political committee.  Pull Name (Last, First, Middle Initial) Dr. Scott Cooper  Mailing Address 183rd Street and Third Avenue  City State FEC ID number of contributing federal political committee.  City State Tip Code NY 1000.00  Date of Receipt  Transaction ID: 17267680  Amount of Each Receipt this Period  Transaction ID: 17267678  Amount of Each Receipt this Period  Transaction ID: 17267678  Amount of Each Receipt this Period  Transaction ID: 17267678  Amount of Each Receipt this Period  Transaction ID: 17267678  Amount of Each Receipt this Period  Transaction ID: 17267678  Amount of Each Receipt this Period  Transaction ID: 17267678  Amount of Each Receipt this Period  Transaction ID: 17267678  Amount of Each Receipt this Period  Transaction ID: 17267678  Amount of Each Receipt this Period  Transaction ID: 17267678  Amount of Each Receipt this Period  Transaction ID: 17267678  Amount of Each Receipt this Period  Transaction ID: 17267678  Amount of Each Receipt this Period  Transaction ID: 17267678  Amount of Each Receipt this Period  Transaction ID: 17267678  Amount of Each Receipt this Period  Transaction ID: 17267678  Amount of Each Receipt this Period  Transaction ID: 17267678  Amount of Each Receipt this Period  Transaction ID: 17267678  Amount of Each Receipt this Period	_ 3.	Ms. Kimberly McNally			Date of Receipt
Seattle WA 98103-9150  FEC ID number of contributing federal political committee.  Name of Employer Harborview Medical Center  Receipt For:  Primary General Other (specify) ▼  Parimary General Other (specify) ▼  Poccupation Manager  Aggregate Year-to-Date ▼  1000.00  Date of Receipt  Amount of Each Receipt this Period  Amount of Each Receipt this Period  Doccupation Manager  Aggregate Year-to-Date ▼  1000.00  Date of Receipt  Mailing Address 183rd Street and Third Avenue  City State Zip Code  NY 10457-9998  FEC ID number of contributing federal political committee.  Name of Employer St. Barnabas Hospital  C Occupation  CEO  Receipt For:  Primary General  Other (specify) ▼  Aggregate Year-to-Date ▼  1000.00		Mailing Address 3300 Meridian Avenue	N.		
FEC ID number of contributing federal political committee.  Name of Employer Harborview Medical Center  Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Dr. Scott Cooper Mailing Address 183rd Street and Third Avenue  City State Zip Code Bronx NY 10457-9998  FEC ID number of contributing federal political committee.  Name of Employer St. Barnabas Hospital  Receipt For: Primary General Occupation CEO  Aggregate Year-to-Date ▼  1000.00		City		Zip Code	Transaction ID: 17267660
Name of Employer Harborview Medical Center    Name of Employer Harborview Medical Center   Occupation Manager		<u>Seattle</u>	WA	98103-9150	Amount of Each Receipt this Period
Harborview Medical Center  Receipt For:			C		1000.00
Receipt For:    Primary   General   1000.00		Name of Employer Harborview Medical Center			
Other (specify) ▼    State   Zip Code   Transaction ID: 17267678		Receipt For:	,		
Dr. Scott Cooper  Mailing Address 183rd Street and Third Avenue  City State Zip Code Bronx NY 10457-9998  FEC ID number of contributing federal political committee.  Name of Employer St. Barnabas Hospital  Receipt For: Primary General Other (specify) ▼  Date of Receipt  M M M O B D O 2009  Transaction ID: 17267678  Amount of Each Receipt this Period  1000.00				1000.00	]
City Bronx State Zip Code NY 10457-9998  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer St. Barnabas Hospital  Receipt For: Primary General Other (specify) ▼  Occupation CEO  Aggregate Year-to-Date ▼  1000.00	- ).	,			Date of Receipt
Bronx  NY 10457-9998  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer St. Barnabas Hospital  CEO  Receipt For:  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  1000.00		Mailing Address 183rd Street and Third	Avenue		
FEC ID number of contributing federal political committee.  Name of Employer St. Barnabas Hospital  Receipt For: Primary General Other (specify)  Other (specify)  1000.00				•	
Name of Employer St. Barnabas Hospital  CEO  Receipt For:  Primary  Other (specify)   Other (specify)   1000.00		FEC ID number of contributing		10457-9998	
Receipt For:  Primary  Other (specify)   Other (specify)   Aggregate Year-to-Date   1000.00				n	
Primary General Other (specify)   Other (specify)   2500.00				e Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)		Primary General	1.59.09410		
SUBTUTAL OF Receipts This Page (optional)	Γ	CURTOTAL of Descints This David (antique)			2500.00
	-	SUBTUTAL of Receipts This Page (optional)			

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 75 / 162 (check only one)    X
A	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may name and add	not be sold or used by any perso fress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ <b>.</b> .	Full Name (Last, First, Middle Initial)  Ms. Lynn B. Nicholas, FACHE  Mailing Address Five New England Exe	cutive Park		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Burlington	State MA	Zip Code 01803-5010	Transaction ID: 17267681  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Massachusetts Hospital Association Receipt For: Primary General Other (specify)	President	and Chief Executive Office Year-to-Date ▼ 1000.00	r
3.	Full Name (Last, First, Middle Initial) Ms. Jeanette G Clough Mailing Address 330 Mount Auburn Stre	eet		Date of Receipt  0 6 1 5 2 0 0 9
	City	State	Zip Code	Transaction ID: 17267685
	Cambridge	MA	02138-5502	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1000.00
	Name of Employer Mount Auburn Hospital Receipt For:		n and Chief Executive Office Year-to-Date ▼	r
	Primary General Other (specify) ▼	Aggregate	1000.00	
	Full Name (Last, First, Middle Initial) Mr. Adrian Stanton  Mailing Address 5013 Fleming Drive			Date of Receipt  0 6 1 5 2 0 0 9
	City	State	Zip Code	Transaction ID: 17267980
	Annandale  FEC ID number of contributing federal political committee.	C	22003-4110	Amount of Each Receipt this Period  350.00
	Name of Employer Inova Health System	Occupation Director		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
		•		2350.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	ζ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 76 / 162   (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may	y not be sold or used by any perso	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  American Hospital Association PAC		arooo or ary pointed committee to	
Full Name (Last, First, Middle Initial) Ms. Darlene Vrotsos			Date of Receipt
Mailing Address 2653 Park Tower D	rive		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Vienna	State VA	Zip Code 22180-7386	Transaction ID: 17267982
FEC ID number of contributing federal political committee.	C	22100-7300	Amount of Each Receipt this Period  350.00
Name of Employer Virginia Hospital Center - Arlington Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼		rsing Officer  Year-to-Date ▼  350.00	
Full Name (Last, First, Middle Initial) Dr. Gary R Yates Mailing Address 1065 Downshire Ch	2000		Date of Receipt
			06 15 2009
City Virginia Beach	State VA	Zip Code 23452-6155	Transaction ID: 17267984  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1 1 1 1 1 1	350.00
Name of Employer Sentara Healthcare	Occupation Chief Me	n dical Officer	
Receipt For:  Primary General  Other (specify) ▼	<del>- ' '</del>	Year-to-Date ▼	
Full Name (Last, First, Middle Initial) Mr. Jon Brovold			Date of Receipt
Mailing Address 203 Fourth Street N	lorthwest		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Bagley	State MN	Zip Code 56621-8305	Transaction ID: 17270146
FEC ID number of contributing federal political committee.	C	30021-0303	Amount of Each Receipt this Period 250.00
Name of Employer Clearwater Health Services	Occupation Administ		
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional	<u> </u>		950.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 77 / 162 (check only one)    X
Any information copied from such Reports an or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  American Hospital Association PAC	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. James F Hanko Mailing Address 1300 Anne St. NW	0		Date of Receipt  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City  Bemidji  FEC ID number of contributing federal political committee.	State MN	Zip Code 56601-5103	Transaction ID: 17270149  Amount of Each Receipt this Period  75.00
Name of Employer North Country Regional Hospital Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼		t and Chief Executive Officer Year-to-Date ▼ 225.00	]
Full Name (Last, First, Middle Initial)  Mr Ken Paulus  Mailing Address P O Box 43			Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City  Minneapolis  FEC ID number of contributing	State MN	Zip Code 55440-0043	Transaction ID: 17270161  Amount of Each Receipt this Period  500.00
Receipt For:  Primary  Other (specify)	Occupatio Chief Op	n erating Officer e Year-to-Date   500.00	
Full Name (Last, First, Middle Initial)  Ms. Mary Ellen Wells  Mailing Address 1095 Highway 15 S	outh		Date of Receipt
City  Hutchinson  FEC ID number of contributing federal political committee.	State MN	Zip Code 55350-5000	Transaction ID: 17270164  Amount of Each Receipt this Period  500.00
Name of Employer Hutchinson Area Health Ca- re Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Presiden Aggregate		
SUBTOTAL of Receipts This Page (optional	l)		1075.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 78 / 162 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  American Hospital Association PAC	d Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. David R Doerr Mailing Address 11200 S. State Rd. 6  City Terre Haute	State Zip Code IN 47802	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee.  Name of Employer Union Hospital  Receipt For: Primary General Other (specify)	Occupation Hospital CEO Aggregate Year-to-Date ▼	500.00
Full Name (Last, First, Middle Initial) Dr. Robert C Keen, , Ph.D., F Mailing Address 4539 E. 500 N.  City	State Zip Code	Date of Receipt    M M
Greenfield  FEC ID number of contributing federal political committee.  Name of Employer Hancock Regional Hospital  Receipt For:  Primary General Other (specify)	Occupation President and Chief Executive Officer Aggregate Year-to-Date  250.00	Amount of Each Receipt this Period  125.00
Full Name (Last, First, Middle Initial) Mr. Douglas J Leonard Mailing Address 2574 Califorinia Stree  City Columbus  FEC ID number of contributing federal political committee.	State Zip Code IN 47201-3649	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Indiana Hospital Association Receipt For:  Primary General Other (specify) ▼	Occupation President  Aggregate Year-to-Date   1000.00	
SUBTOTAL of Receipts This Page (optional)	<u> </u>	1625.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 79 / 162 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any person name and address of any political committee to s	for the purpose of soliciting contributions colicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Robert L Sloan		Date of Receipt
Mailing Address 5255 Loughboro Road  City	NW State Zip Code	0 6 1 7 2 0 0 9  Transaction ID: 17270407
Washington	DC 20016-2695	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Sibley Memorial Hospital	Occupation President and Chief Executive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Robert B Aikens		Date of Receipt
Mailing Address PO Box 1336		06 17 2009
City	State Zip Code	Transaction ID: 17270408
Boca Grande	FL 33921-1336	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Beaumont Hospital - Royal Oak	Occupation Trustee	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Laura D. Appel		Date of Receipt
Mailing Address 110 West Michigan Av Suite 1200		06 17 2009
City <u>Lansing</u>	State Zip Code MI 48933-1611	Transaction ID: 17270409
FEC ID number of contributing federal political committee.	C 40935-1011	Amount of Each Receipt this Period 500.00
Name of Employer Michigan Health & Hospital Association	Occupation Vice President, Federal Policy & Advoc	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)	······	1350.00
TOTAL This Period (last page this line number	<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 80 / 162 (check only one)    X   11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any persename and address of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Thomas Bres Mailing Address 2288 Barnsbury Road City East Lansing FEC ID number of contributing federal political committee.  Name of Employer Sparrow Health System  Receipt For: Primary General	State Zip Code MI 48823-7780  C  Occupation CIO  Aggregate Year-to-Date	Date of Receipt    M M M
Other (specify) ▼  Full Name (Last, First, Middle Initial) Mr. Robert F Casalou  Mailing Address 26462 Glenwood Dr.  City  Novi  FEC ID number of contributing federal political committee.  Name of Employer St. Joseph Mercy Hospital	State Zip Code MI 48374-1233  C Occupation	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Mr. Kevin Cawley  Mailing Address 11803 Silverspring Dr.	President & CEO  Aggregate Year-to-Date ▼  1000.00	Date of Receipt  M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City  Dewitt  FEC ID number of contributing federal political committee.	State Zip Code MI 48820-7731  C	Transaction ID: 17270414  Amount of Each Receipt this Period  340.00
Name of Employer Sheridan Community Hospit- al Receipt For:  Primary General Other (specify) ▼	Occupation Chief Executive Officer  Aggregate Year-to-Date   340.00	
SUBTOTAL of Receipts This Page (optional)		1715.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 81 / 162 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
7	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	statements may r name and addre	not be sold or used by any perso ess of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
∠ <b>A.</b>	Full Name (Last, First, Middle Initial)  Mr. K. Douglas Deck  Mailing Address 10275 S. Apple Ridge	Dr.		Date of Receipt  0 6 1 7 2 0 0 9
	City	State	Zip Code	Transaction ID: 17270416
	Traverse City  FEC ID number of contributing federal political committee.	C	49684-6839	Amount of Each Receipt this Period 500.00
	Name of Employer Munson Healthcare Receipt For:	Occupation President a	and CEO /ear-to-Date ▼	
_	Primary General Other (specify) ▼	0 0	500.00	
3.	Full Name (Last, First, Middle Initial) Mr. Bob Doud Mailing Address 1914 Skyler Drive			Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 17270417
	Kalamazoo  FEC ID number of contributing federal political committee.	C	49008-2882	Amount of Each Receipt this Period  212.50
	Name of Employer Bronson Healthcare Group, Inc.	Occupation Vice President	dent	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Y	/ear-to-Date ▼ 212.50	
- >.	Full Name (Last, First, Middle Initial) Mr. Michael Duggan	l		Date of Receipt
	Mailing Address 3990 John R Street			06 17 2009
	City Detroit	State MI	Zip Code 48201-2018	Transaction ID: 17270418
	FEC ID number of contributing federal political committee.	C	40201-2010	Amount of Each Receipt this Period 500.00
	Name of Employer Detroit Medical Center	Occupation President a	and Chief Executive Office	<del>-</del>
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Y	/ear-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)	I		1212.50
Ī	TOTAL This Period (last page this line number	only)		

St. Joseph Merćy Hospital	State Zip Code MI 48104-1003  C  C  C  C  C  C  C  C  C  C  C  C  C	Date of Receipt  M M J D D Z O O 9  Transaction ID: 17270420  Amount of Each Receipt this Period
Mr. Gene Eavy  Mailing Address 709 N. Fourth Street  City  Ann Arbor  FEC ID number of contributing federal political committee.  Name of Employer St. Joseph Mercy Hospital  Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Mr. James B. Falahee, Jr.  Mailing Address 7463 Cottage Oak Drive	MI 48104-1003  C Decupation Director	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Ann Arbor  FEC ID number of contributing federal political committee.  Name of Employer St. Joseph Mercy Hospital  Receipt For: Primary General Other (specify)  Full Name (Last, First, Middle Initial) Mr. James B. Falahee, Jr.  Mailing Address 7463 Cottage Oak Drive	MI 48104-1003  C Decupation Director	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer St. Joseph Mercy Hospital  Receipt For: Primary General Other (specify)  Full Name (Last, First, Middle Initial) Mr. James B. Falahee, Jr.  Mailing Address 7463 Cottage Oak Drive	Occupation Director	
Receipt For: Primary General Other (specify)  Full Name (Last, First, Middle Initial) Mr. James B. Falahee, Jr. Mailing Address 7463 Cottage Oak Drive	Director	
Mr. James B. Falahee, Jr.  Mailing Address 7463 Cottage Oak Drive	500.00	
City		Date of Receipt  0 6 1 7 2 0 0 9
	State Zip Code	Transaction ID: 17270422
Portage	MI 49024-2352	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	325.00
Bronson Heálthcare Group, Inc.	Occupation Senior VP, Legal/Legislative Relations Aggregate Year-to-Date ▼	
Other (specify) ▼	325.00	
Full Name (Last, First, Middle Initial) Ms. Alice Gerard		Date of Receipt
Mailing Address 3231 Bangor Rd.		06 17 2009
City	State Zip Code	Transaction ID: 17270473
Bay City	MI 48706-1852	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	850.00
Bay Regional Medical Cent- er	Occupation President & CEO	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 850.00	
SUBTOTAL of Receipts This Page (optional)		

SCHEDULE A (FEC FO ITEMIZED RECEIPTS	TM 3X)  Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 83 / 162 (check only one)  X 11a 11b 11c 12
	eports and Statements may not be sold or used by any perso an using the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full American Hospital Associat		
Full Name (Last, First, Middle Init Mr. Peter Graham	ial)	Date of Receipt
Mailing Address 2233 Quarry		0 6 1 7 2 0 0 9
City <u>East Lansing</u>	State Zip Code MI 48823-7234	Transaction ID: 17270475  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Sparrow Health System	Occupation Vice President, Sparrow Medical Gro	up
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Init Ms. Kathleen S Griffiths	ial)	Date of Receipt
Mailing Address 775 South N	Main Street	06 17 2009
City	State Zip Code	Transaction ID: 17270479
Chelsea	MI 48118-1383	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Chelsea Community Hospital	Occupation President and Chief Executive Officer	r
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Init Mrs. Kathleen Harrelson	ial)	Date of Receipt
Mailing Address 6181 Karabi	rook Court	06 17 2009
City	State Zip Code	Transaction ID: 17270480
Kalamazoo	MI 49009-8961	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	237.50
Name of Employer Bronson Healthcare Group, Inc.	Occupation Vice President of Nursing	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 237.50	
SUBTOTAL of Receipts This Page	(optional)	737.50

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	<b>A)</b>	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 84 / 162   (check only one)   X   11a
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  American Hospital Association PAC		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Full Name (Last, First, Middle Initial) Mr. John T. Hayden			Date of Receipt
Mailing Address PO Box 19368			0 6 1 7 2 0 0 9
City Kalamazoo	State MI	Zip Code 49019-0368	Transaction ID: 17270588  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		325.00
Name of Employer Bronson Healthcare Group, Inc. Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼		sident Human Resources e Year-to-Date  325.00	]
Full Name (Last, First, Middle Initial) Mr. Robert Hoban Mailing Address 911 Balfour			Date of Receipt  0 6 1 7 2 0 0 9
City	State	Zip Code	Transaction ID: 17270590
Grosse Pointe Park	MI	48230-1815	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer St. John Health	Occupatio Sr. Vice	n President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	]
Full Name (Last, First, Middle Initial) Mr. Neil Johnson			Date of Receipt
Mailing Address 6892 Penny Lane			0 6 1 7 2 0 0 9
City Kalamazoo	State MI	Zip Code 49009-7505	Transaction ID: 17270591  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	43003 7303	210.00
Name of Employer Bronson Healthcare Group, Inc.	Occupatio Vice Pres	sident	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 210.00	
SUBTOTAL of Receipts This Page (optional	l)		785.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 85 / 162 (check only one)  X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions o solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. John L. Jones, Jr.		Date of Receipt
Mailing Address 1814 Hazel Avenue  City	State Zip Code	0 6 1 7 2 0 0 9  Transaction ID: 17270592
<u>Kalamazoo</u>	MI 49008-2844	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	237.50
Name of Employer Bronson Healthcare Group, Inc.	Occupation Vice President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 237.50	
Full Name (Last, First, Middle Initial) Mr John Keuten		Date of Receipt
Mailing Address 570 Brittany Court		06 17 2009
City	State Zip Code	Transaction ID: 17270594
Rochester Hills	MI 48309-2613	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Oakwood Healthcare, Inc.	Occupation President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Ms. Cheryl Knapp		Date of Receipt
Mailing Address 7183 Cross Country		06 17 2009
City <u>Kalamazoo</u>	State Zip Code MI 49009-7588	Transaction ID: 17270595  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	210.00
Name of Employer Bronson Healthcare Group, Inc.	Occupation Vice President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	
CURTOTAL of Provints This Prove (autional)		697.50

ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 86 / 162   (check only one)     X   11a     11b     11c   12   13   14     15     16
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. Scott D. Larson, MD			Date of Receipt
Mailing Address 1531 Academy Stree	et		0 6 1 7 2 0 0 9
City Kalamazoo	State MI	Zip Code 49006-4400	Transaction ID: 17270598  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		325.00
Name of Employer Bronson Healthcare Group, Inc.	Occupatio Vice Pre		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	
Full Name (Last, First, Middle Initial) Dr. Patricia A Maryland, , Dr.PH			Date of Receipt
Mailing Address 28000 Dequindre			0 6 1 7 2 0 0 9
City	State	Zip Code	Transaction ID: 17270601
Warren FEC ID number of contributing federal political committee.	C	48092-2468	Amount of Each Receipt this Period 500.00
Name of Employer St. John Health	Occupatio Presiden		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	]
Full Name (Last, First, Middle Initial) Dr. William J Mayer, MD			Date of Receipt
Mailing Address 3521 Whistling Ln.			0 6 1 7 2 0 0 9
City Portage	State MI	Zip Code 49024-5513	Transaction ID: 17270602  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40024 3010	210.00
Name of Employer Bronson Healthcare Group, Inc.	Occupatio Administ	rator	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 210.00	
SUBTOTAL of Receipts This Page (optional)			1035.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 87 / 162 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports an or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  American Hospital Association PAC	d Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  Ms. Mary M. Meitz  Mailing Address 11425 Long Point C  City  Plainwell	Or. State Zip Code MI 49080-9265	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee.  Name of Employer Bronson Healthcare Group, Inc.  Receipt For:  Primary General Other (specify) ▼	Occupation Vice President, Finance Aggregate Year-to-Date  210.00	210.00
Full Name (Last, First, Middle Initial) Mr. Thomas Ostrander  Mailing Address 5433 Zimmer Road  City Williamston  FEC ID number of contributing federal political committee.  Name of Employer Sparrow Hospital  Receipt For: Primary Other (specify)	State Zip Code MI 48895-9181  C  Occupation Human Resource Management Aggregate Year-to-Date  375.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Steve Paulus  Mailing Address 17020 Carriage Wa  City Northville  FEC ID number of contributing federal political committee.  Name of Employer St. Joseph Mercy Hospital  Receipt For: Primary General Other (specify)	y  State Zip Code MI 48168-6602  C  Occupation Vice President  Aggregate Year-to-Date ▼  375.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional	l) <b>&gt;</b>	960.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for	e separate schedule(s) each category of the tailed Summary Page	FOR LINE NUMBER: PAGE 88 / 162 (check only one)    X
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	tatements may not b name and address o	e sold or used by any perso of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
). <b>A</b> .	Full Name (Last, First, Middle Initial) Ms. Michelle Serbenski Pelletier Mailing Address 51255 38th Street			Date of Receipt
	City Paw Paw FEC ID number of contributing	MI 4	(ip Code 19079-8315	Transaction ID: 17270608  Amount of Each Receipt this Period
	Receipt For:  Primary  Other (specify) ▼	Occupation Vice President Aggregate Year-		210.00
Б.	Full Name (Last, First, Middle Initial)  Ms Annette Phillips  Mailing Address 24011 Timber Creek L	ane		Date of Receipt  0 6 1 7 2 0 0 9
	City	State Z	Zip Code	Transaction ID: 17270609
	Brownstown	MI 4	18134-8013	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer Mercy Memorial Hospital System	Occupation President & C		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-	to-Date ▼ 250.00	
с. С.	Full Name (Last, First, Middle Initial) Ms. Sue Reinoehl			Date of Receipt
	Mailing Address 8804 Weeping Pine Lr			06 17 2009
	City Kalamazoo		Zip Code	Transaction ID: 17270610
	FEC ID number of contributing federal political committee.	C	19009-6733	Amount of Each Receipt this Period  250.00
	Name of Employer Bronson Healthcare Group, Inc.	Occupation Vice President		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-	to-Date 250.00	]
	SUBTOTAL of Receipts This Page (optional)			710.00
Ì	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 89 / 162 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any pere name and address of any political committee	son for the purpose of soliciting contributions
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Robert Riney		Date of Receipt
Mailing Address 45989 Tournament Di		06 17 2009
City	State Zip Code	Transaction ID: 17270611
Northville 550 in the first in the second se	MI 48167-9633	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Henry Ford Health System	Occupation Chief Operating Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Ms. Donna M. Roach, FHIMSS	1	Date of Receipt
Mailing Address 10601 Stoneyfield Ct.		06 17 2009
City	State Zip Code	Transaction ID: 17270612
Pinckney	MI 48169-9584	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	210.00
Name of Employer Allegiance Health	Occupation Director, Information Systems	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	210.00	
Full Name (Last, First, Middle Initial) Mr. Gary Rounding		Date of Receipt
Mailing Address 22350 Banyan Hideav	vay Dr.	0 6 1 7 2 0 0 9
City	State Zip Code	Transaction ID: 17270614
Bonita Springs	FL 34135-8151	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Henry Ford Health System	Occupation Administrator	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
		960.00

Any information copied from such Paparts and	Detailed Summary Page	X   11a   11b   11c   12   13   14   15   16   17
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any person ne name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  Mr. Matthew Rush  Mailing Address 321 East Harris Stree	et	Date of Receipt
City Charlotte	State Zip Code MI 48813-1697	Transaction ID: 17270615  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer Hayes Green Beach Memorial Hospital Receipt For:  Primary  General  Other (specify) ▼	Occupation President and Chief Executive Officer  Aggregate Year-to-Date   400.00	
Full Name (Last, First, Middle Initial) Mr. Frank J Sardone Mailing Address One Healthcare Plaza	a	Date of Receipt  0 6 1 7 2 0 0 9
City	State Zip Code	Transaction ID: 17270616
Kalamazoo  FEC ID number of contributing federal political committee.	MI 49007-5339	Amount of Each Receipt this Period 500.00
Name of Employer Bronson Healthcare Group, Inc. Receipt For: Primary General	Occupation President and Chief Executive Officer  Aggregate Year-to-Date ▼  500.00	
Full Name (Last, First, Middle Initial)		
Mr. David Seaman  Mailing Address 805 Ledge Moor Blvd	i.	Date of Receipt    M M
City	State Zip Code	Transaction ID: 17270617
Grand Ledge  FEC ID number of contributing federal political committee.	MI 48837-2037	Amount of Each Receipt this Period 750.00
Name of Employer Michigan Health & Hospital Association	Occupation Executive Vice President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	1650.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 91 / 162 (check only one)    X   11a
0	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
۸.	Full Name (Last, First, Middle Initial) Ms. Joy Strand Mailing Address 54922 Sunset Drive		Date of Receipt
			06 17 2009
	City Dowagiac	State Zip Code MI 49047-9461	Transaction ID: 17270618  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Borgess Health Alliance	Occupation Adminstrator	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
- 3.	Full Name (Last, First, Middle Initial) Mr Kenneth L Taft		Date of Receipt
	Mailing Address 2964 East T Ave.		06 17 2009
	City	State Zip Code	Transaction ID: 17270620
	Portage  FEC ID number of contributing federal political committee.	MI 49002-7533	Amount of Each Receipt this Period  375.00
	Name of Employer Bronson Healthcare Group, Inc.	Occupation Executive Vice President and COO	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	]
_	Full Name (Last, First, Middle Initial) Mr. Terence A. Thomas		Date of Receipt
	Mailing Address 18214 Parkside		06 17 2009
	City Detroit	State Zip Code MI 48221-2727	Transaction ID: 17270622
	FEC ID number of contributing federal political committee.	C 40221-2727	Amount of Each Receipt this Period 280.00
	Name of Employer St. John Health	Occupation Senior Vice President, External Affair	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	
Γ	SUBTOTAL of Receipts This Page (optional)		905.00

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 92 / 162 (check only one)    X
ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persename and address of any political committee to	on for the purpose of soliciting contributions
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Mike Way		Date of Receipt
Mailing Address 7049 Turkey Glen Tra		06 17 2009
City Kalamazoo	State Zip Code MI 49009-7031	Transaction ID: 17270623
FEC ID number of contributing	MI 49009-7031	Amount of Each Receipt this Period 210.00
federal political committee.  Name of Employer	Occupation	_
Name of Employer Bronson Healthcare Group, Inc.	Vice President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	210.00	
Full Name (Last, First, Middle Initial) Ms. Mary Lou Wesley	1	Date of Receipt
Mailing Address 5301 East Huron Rive	0 6 1 7 2 0 0 9	
City	State Zip Code	Transaction ID: 17270624
Ypsilanti	MI 48197-1051	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer St. Joseph Mercy Hospital	Occupation Chief Nursing Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Mr. Lawrence H. Wilhite	1	Date of Receipt
Mailing Address 3006 Pinto Circle		0 6 1 7 2 0 0 9
City	State Zip Code	Transaction ID: 17270625
Lansing	MI 48906-9082	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Sparrow Hospital	Occupation Vice President, Legal and Risk Mana	ngem
Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
		960.00

ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)    X
Any information copied from such Reports ar or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  American Hospital Association PAG	nd Statements may not be sold or used by any person f the name and address of any political committee to so	or the purpose of soliciting contributions licit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Matthew G VanVranken  Mailing Address 5669 Watermark C	t. SE	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17270627
Grand Rapids  FEC ID number of contributing federal political committee.	MI 49546-6487	Amount of Each Receipt this Period 500.00
Name of Employer Spectrum Health Receipt For:	Occupation President  Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Mr. Dwight L. Fine Mailing Address 12675 Riviera Heig	hts Road	Date of Receipt  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17271864
Holts Summit  FEC ID number of contributing federal political committee.	MO 65043-2039	Amount of Each Receipt this Period 87.50
Name of Employer Missouri Hospital Associa- tion Receipt For:	Occupation Sr. Vice President, Health Policy Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial) Mr. Daniel R. Landon		Date of Receipt
Mailing Address 611 Belridge Drive P.O. Box 60		06 18 7 2009
City Jefferson City	State Zip Code MO 65109-0755	Transaction ID: 17271867  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	62.50
Name of Employer Missouri Hospital Associa- tion	Occupation Sr. Vice President, Governmental Relat	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional	I)	650.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 94/162   (check only one)
Any information copied from such Reports are or for commercial purposes, other than using	nd Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  American Hospital Association PA	<u> </u>	· · · · · · · · · · · · · · · · · · ·	
Full Name (Last, First, Middle Initial) Mr. Marc D. Smith			Date of Receipt
Mailing Address 5612 Tanner Bridge	e Road		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Jefferson City	State MO	Zip Code 65101-8275	Transaction ID: 17272150  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		125.00
Name of Employer Missouri Hospital Associa- tion Receipt For:		n t and Chief Executive Officer Year-to-Date	, <u> </u>
Primary General Other (specify) ▼		500.00	
Full Name (Last, First, Middle Initial) Mr. Vincent J McCorkle, , CHE	<u> </u>		Date of Receipt
Mailing Address 8 Wagon Dr.			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 17273573
Wilbraham  FEC ID number of contributing federal political committee.	C	01095-1678	Amount of Each Receipt this Period  350.00
Name of Employer Sisters of Providence Hea- Ith System	Occupation Presiden	n t and Chief Executive Office	<del>-</del>   .
Receipt For:	<del>, '</del>	e Year-to-Date ▼	
Primary General Other (specify) ▼		350.00	
Full Name (Last, First, Middle Initial) Mr. William G Robertson			Date of Receipt
Mailing Address 2000 Sondra Court	İ		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 17273675
Silver Spring FEC ID number of contributing federal political committee.	MD C	20905-3950	Amount of Each Receipt this Period  350.00
Name of Employer Adventist HealthCare	Occupation Presiden	n t and Chief Executive Office	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional	al)		825.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 95 / 162 (check only one)    X   11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any pers e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Larry D. Hancock Mailing Address 10183 South Loridan  City Sandy  FEC ID number of contributing federal political committee.  Name of Employer Intermountain Healthcare,	Lane  State Zip Code UT 84092-4494  C  Occupation Chief Operating Officer	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Inc. Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼  350.00	
Full Name (Last, First, Middle Initial) Ms Erica Silver Dahl Mailing Address 36 South State Street	, 22nd Fl	Date of Receipt  0 6 1 9 2 0 0 9
City	State Zip Code	Transaction ID: 17273795
Salt Lake City  FEC ID number of contributing federal political committee.	UT 84111-1624	Amount of Each Receipt this Period  250.00
Name of Employer Intermountain Healthcare, Inc.	Occupation Director of Community Realations	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr Brian M Kent		Date of Receipt
Mailing Address 36 South State Street	, 22nd Fl	06 19 2009
City	State Zip Code	Transaction ID: 17273797
Salt Lake City  FEC ID number of contributing federal political committee.	UT 84111-1624	Amount of Each Receipt this Period 250.00
Name of Employer Intermountain Healthcare, Inc.	Occupation Administrator	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
		850.00

Any information copied from su or for commercial purposes, of NAME OF COMMITTEE (I American Hospital Ass	ner than using the name and an Full) ociation PAC	nay not be sold or used by any persiddress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Midd	lle Initial)		
Mr. Scott Bowman  Mailing Address 304 Wr  City	ight Street State	Zip Code	Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
Sweetwater	TN	37874-2897	Amount of Each Receipt this Period
FEC ID number of contributed federal political committee.	ing		500.00
Name of Employer Sweetwater Hospital	Occupat Admini		
Receipt For:  Primary Ger  Other (specify) ▼	Aggrega	ate Year-to-Date ▼ 500.00	
Full Name (Last, First, Midd Mr. Robert S. Gordon Mailing Address 7891 C			Date of Receipt
			06 19 2009
City	State	Zip Code	Transaction ID: 17273799
Germantown  FEC ID number of contributed federal political committee.	ing C	38138-8117	Amount of Each Receipt this Period 500.00
Name of Employer Baptist Memorial Health Care Corporati Receipt For:		ve Vice President & CAO	
	neral	ate Year-to-Date   500.00	
Full Name (Last, First, Midd Mr. Scott Millikan, MD	lle Initial)		Date of Receipt
Mailing Address 2800 10	Oth Avenue North		06 19 2009
City	State MT	Zip Code	Transaction ID: 17273864
Billings  FEC ID number of contribut federal political committee.		59101-0703	Amount of Each Receipt this Period  250.00
Name of Employer Billings Clinic	Occupat Trustee		
Receipt For:  Primary Ger  Other (specify) ▼		ate Year-to-Date  250.00	
SUBTOTAL of Receipts This	Page (optional)		1250.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 97 / 162 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any person ename and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Andrew S. Davidson		Date of Receipt
Mailing Address 2123 Ridgebrook Driv		06 22 2009
City West Linn	State Zip Code OR 97068-1943	Transaction ID: 17277126  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Oregon Association of Hospitals & Heal Receipt For: Primary General	Occupation President & CEO  Aggregate Year-to-Date ▼	
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial)  Ms. Linda Lang  Mailing Address 4000 Kruse Way Place	e #2-100	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17277128
Lake Oswego	OR 97035-2543	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Oregon Association of Hos- pitals & Heal	Occupation Director of Rural Health Services	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Ms. Gwen Dayton		Date of Receipt
Mailing Address 12781 SW Terraview	Drive	0 6 2 2 2 0 0 9
City	State Zip Code	Transaction ID: 17277129
Tigard  FEC ID number of contributing federal political committee.	OR 97224-0703	Amount of Each Receipt this Period  250.00
Name of Employer Oregon Association of Hos- pitals & Heal	Occupation Vice President & General Counsel	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		1100.00
TOTAL This Period (last page this line number	only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 98 / 162 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	tatements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Andy Van Pelt  Mailing Address 4000 Kruse Way Place Building 2, Suite 100  City Lake Oswego  FEC ID number of contributing federal political committee.  Name of Employer Oregon Association of Hospitals & Heal Receipt For:	State Zip Code OR 97035-5545  C Occupation Director of Communications Aggregate Year-to-Date	Date of Receipt  M M Z D Z Z Z D O 9  Transaction ID: 17277130  Amount of Each Receipt this Period  210.00
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Ms. Peggy Allen	Aggregate Year-to-Date V	Date of Receipt
Mailing Address 18839 Roundtree  City  Oregon City  FEC ID number of contributing federal political committee.  Name of Employer Oregon Association of Hospitals & Heal Receipt For:  □ Primary □ General □ Other (specify) ▼	State Zip Code OR 97045-3920  C  Occupation Director of Finance  Aggregate Year-to-Date  295.00	Transaction ID: 17277132  Amount of Each Receipt this Period  295.00
Full Name (Last, First, Middle Initial) Dr. Steve Gordon, MD  Mailing Address 2155 Eaton Drive  City  Eugene  FEC ID number of contributing federal political committee.  Name of Employer PeaceHealth  Receipt For:  Primary General Other (specify)	State Zip Code OR 97403-1732  C  Occupation VP/Chief Quality Officer  Aggregate Year-to-Date  250.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y  O 6 22 2 2 0 0 9  Transaction ID: 17277133  Amount of Each Receipt this Period  250.00
SUBTOTAL of Receipts This Page (optional)		755.00

SCHEDULE A (FE	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 99 / 162 (check only one)    X
Any information copied from sor for commercial purposes, of NAME OF COMMITTEE American Hospital As	other than using the name and a	nay not be sold or used by any perso address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Mic Mr. Roy G Vinyard, , FACHE Mailing Address 2650 S		Zip Code	Date of Receipt  M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Medford  FEC ID number of contrib federal political committee		97504-8170	Amount of Each Receipt this Period 500.00
Name of Employer Asante Health System  Receipt For:  Primary Ge Other (specify) ▼	<del>   </del>	ent and Chief Executive Officer ate Year-to-Date ▼ 500.00	]
Full Name (Last, First, Mid Mr. Melvin R Creeley Mailing Address 425 W	, 		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 17284059
East Liverpool	OH	43920-2498	Amount of Each Receipt this Period
FEC ID number of contrib federal political committee			250.00
Name of Employer East Liverpool City Hospital Receipt For: Primary Other (specify)	Preside		
Full Name (Last, First, Mic	ddle Initial)		Date of Receipt
Mailing Address 2951 I	Maple Avenue		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 17284078
Zanesville  FEC ID number of contrib federal political committee		43701-1406	Amount of Each Receipt this Period  250.00
Name of Employer Genesis HealthCare Syste	em Occupat Preside	ion ent and Chief Executive Office	r
Receipt For:  Primary Ge  Other (specify) ▼	Aggrega	ate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts Thi	s Page (ontional)		1000.00

•	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)    X   11a
A OI	ny information copied from such Reports and S for commercial purposes, other than using the	Statements may a name and addr	not be sold or used by any personess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC			
۷.	Full Name (Last, First, Middle Initial) Mr. Daniel L Wakeman			Date of Receipt
	Mailing Address 5901 Monclova Road	Otata	7'- 0-1-	06 23 2009
	City Maumee	State OH	Zip Code 43537-1841	Transaction ID: 17284151  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer St. Luke's Hospital	Occupation President	and Chief Executive Office	r
	Receipt For:  Primary General  Other (specify) ▼	Aggregate \	Year-to-Date ▼ 500.00	
	Full Name (Last, First, Middle Initial) Mr. Matthew Lambert, M.D.			Date of Receipt
	Mailing Address 9801 Renner Boulevard, Ste. 10			06 25 2009
	City	State	Zip Code	Transaction ID: 17285304
	Lenexa	KS	66219-9718	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		350.00
	Name of Employer Sisters of Charity of Lea- venworth Heal	Occupation Board Dire	ector	
	Receipt For:	Aggregate \	Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	350.00	
_	Full Name (Last, First, Middle Initial) Mr. George G Couch			Date of Receipt
	Mailing Address 36 Floral Drive			0 6 2 5 2 0 0 9
	City	State	Zip Code	Transaction ID: 17285307
	Wheeling	WV	26003-5464	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Wetzel County Hospital	Occupation Chief Exec	cutive Officer	
	Receipt For: Primary General Other (specify)	Aggregate \	Year-to-Date ▼ 500.00	
[	SUBTOTAL of Receipts This Page (optional)			1350.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 101 / 162 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	tatements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Michael A King  Mailing Address 1503 Greenmont Hills  City Vienna	Drive State Zip Code WV 26105-3282	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee.  Name of Employer Camden-Clark Memorial Hospital Receipt For:  Primary General Other (specify)	Occupation President and Chief Executive Officer Aggregate Year-to-Date   500.00	500.00
Full Name (Last, First, Middle Initial) Mr. Albert Pilkington, III  Mailing Address 93 Aquifir Lane  City Falling Waters  FEC ID number of contributing federal political committee.  Name of Employer WVU Hospitals - East  Receipt For: Primary General Other (specify)	State Zip Code WV 25419  C  Occupation President & Chief Executive Officer  Aggregate Year-to-Date  250.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Ms Karen O Moore, , R.N., MS  Mailing Address 40 Main St Apt A  City Shelburne Falls  FEC ID number of contributing federal political committee.  Name of Employer Kindred Hospital, Springfiled, MA  Receipt For: Primary General Other (specify)	State Zip Code MA 01370-1154  C  Occupation CEO  Aggregate Year-to-Date  350.00	Date of Receipt  M M Z G Z G Z D O 9  Transaction ID: 17289212  Amount of Each Receipt this Period  350.00
SUBTOTAL of Receipts This Page (optional)	<b>)</b>	1100.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 102 / 162 (check only one)    X
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any persole name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Patrick Charmel		Date of Receipt
Mailing Address 130 Division Street  City	State Zip Code	06 26 2009
<u>Derby</u>	CT 06418-1326	Transaction ID: 17289216  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Griffin Hospital	Occupation President and Chief Executive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Roger J Reamer	<u></u>	Date of Receipt
Mailing Address 300 N. Columbia		06 26 2009
City	State Zip Code	Transaction ID: 17289258
Seward  FEC ID number of contributing federal political committee.	NE 68434-2228	Amount of Each Receipt this Period  350.00
Name of Employer Memorial Health Care Syst- ems	Occupation Chief Executive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Rod Betit		Date of Receipt
Mailing Address 426 Main Street		0 6 2 6 2 0 0 9
City	State Zip Code	Transaction ID: 17289260
Juneau FEC ID number of contributing federal political committee.	AK 99801-1152	Amount of Each Receipt this Period 500.00
Name of Employer Alaska State Hospital & Nursing Home A Receipt For: Primary General	Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼	
Other (specify) ▼	500.00	
CURTOTAL of Descripts This Descriptional		1350.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 103 / 162 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  American Hospital Association PAC	d Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Fredrick J. Jacobs Mailing Address 23 E. Delaware Aver	State Zip Code	Date of Receipt    M   M     D   D     Y   Y   Y   Y   Y   Y   Y
Pennington  FEC ID number of contributing federal political committee.	NJ 08534-2302	Amount of Each Receipt this Period
Name of Employer New Jersey Hospital Association Receipt For:  ☐ Primary ☐ General  Other (specify) ▼	Occupation General Counsel  Aggregate Year-to-Date   315.00	
Full Name (Last, First, Middle Initial) Ms. Deborah K Zastocki, , FACHE Mailing Address 42 Long Ridge Road	ı	Date of Receipt    M   M   D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
City Randolph FEC ID number of contributing	State Zip Code NJ 07869-4571	Transaction ID: 17289427  Amount of Each Receipt this Period  500.00
Rame of Employer Chilton Memorial Hospital	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Shawn Smothers  Mailing Address 317 First Avenue, N	W	Date of Receipt  0 6 29 2009
P. O. Box 697 City Kenmare	State Zip Code ND 58746-7104	Transaction ID: 17291926  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	750.00
Name of Employer Trinity Health	Occupation Chief Executive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
		1260.00

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  NAME OF COMMITTEE (in Full)  American Hospital Association PAC  Full Name (Last, First, Middle Initial)  M. Thomas Noducks.  Mailing Address P O Box 1450  City  Strate Zip Code  Douglas  WY 82633-1450  FEC ID number of contributing federal political committee.  Name of Employer  Memorial Hospital of Conventions.  Personal Aggregate Year-to-Date ▼  Pormany  General  Other (specify) ▼  Strate Zip Code  Mailing Address 2005 Warren Avenue  Post Office Box 249  City  Strate Zip Code  MY 82801-3725  FEC ID number of contributing federal political committee.  Date of Receipt  Transaction ID: 17291931  Amount of Each Receipt this Period  Transaction ID: 17291931  Amount of Each Receipt this Period  Date of Receipt  FEC ID number of contributing federal political committee.  C. Name of Employer  Wy 92801-3725  FEC ID number of contributing federal political committee.  Primary  General  Other (specify) ▼  Full Name (Last, First, Middle Initial)  M. Eberia K Secreta Receipt for:  Primary  General  Other (specify) ▼  Strate Zip Code  Aggregate Year-to-Date ▼  Primary  General  Other (specify) ▼  Strate Zip Code  Transaction ID: 17291931  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17292209  Transaction ID: 17292209  Transaction ID: 17292209  Transaction ID: 17292209  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  C. Name of Employer  River Primary  General  Other (specify) ▼  Strate Zip Code  Amount of Each Receipt this Period  Primary  General Other (specify) ▼  Strate Zip Code  Amount of Each Receipt this Period  Transaction ID: 17292209  Transac		SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 104 / 162 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
A. Mr. Thomas Nordwick  Mailing Address P O Box 1450  City State Zip Code Douglas WYY 82633-1450  FEC ID number of contributing federal political committee.  C C  C Cocupation President and Chief Executive Officer Receipt For: Primary General Other (specify) ▼  State Zip Code Mailing Address 2005 Warren Avenue Post Office Box 249  City State Zip Code Chevenne WYY 82001-3725  FEC ID number of contributing federal political committee.  C C  Date of Receipt  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17291931  Amount of Each Receipt this Period  Date of Receipt  Amount of Each Receipt this Period  Date of Receipt  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17291931  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17291931  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17291931  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17291931  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17291931  Date of Receipt  Transaction ID: 17291931  Amount of Each Receipt this Period  Date of Receipt  Date of Receipt  Transaction ID: 17291931  Date of Receipt  Date of Receipt  Transaction ID: 17291931  Date of Receipt  Transaction ID: 17291931  Date of Receipt  Date of Receipt  Transaction ID: 17292020  Transaction ID: 17292020  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17292020  Transaction ID: 17292020  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17292020  Transaction ID: 1729020		or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Mr. Daniel J. Perdue Mailing Address 2005 Warren Avenue Post Office Box 249  City State Zip Code WY 82001-3725  FEC ID number of contributing federal political committee.  Name of Employer Wyoming Hospital Association Beceipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Ms. Debra K Boardman Mailing Address 323 South Minnesota Street  Crookston  Name of Employer Riverview Healthcare Association FEC ID number of contributing federal political committee.  C Date of Receipt  Amount of Each Receipt his Period  Transaction ID: 17292209  Amount of Each Receipt this Period  Transaction ID: 17292209  Amount of Each Receipt this Period  C Cucupation FEC ID number of contributing federal political committee.  C Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  C Amount of Each Receipt this Period  C 250.00	<b>∠</b> <b>A</b> .	Mr. Thomas Nordwick  Mailing Address P O Box 1450  City  Douglas  FEC ID number of contributing federal political committee.  Name of Employer Memorial Hospital of Converse County	C Occupation Presiden	82633-1450 on it and Chief Executive Office	Transaction ID: 17291930  Amount of Each Receipt this Period  500.00
Mr. Daniel J. Perdue  Mailing Address 2005 Warren Avenue Post Office Box 249  City State Zip Code Cheyenne WY 82001-3725  FEC ID number of contributing federal political committee.  Name of Employer Vyoming Hospital Association Ms. Debra K Boardman  Mailing Address 323 South Minnesota Street  City State Zip Code Primary General Other (specify) ▼	_	Primary General Other (specify) ▼	Aggregate	500.00	
Primary Other (specify) ▼    Date of Receipt	3.	Mr. Daniel J. Perdue  Mailing Address  2005 Warren Avenue Post Office Box 249  City  Cheyenne  FEC ID number of contributing federal political committee.  Name of Employer Wyoming Hospital Association	C Occupation Presiden	82001-3725	Transaction ID: 17291931  Amount of Each Receipt this Period
Mailing Address 323 South Minnesota Street  City State Zip Code Crookston MN 56716-1600  FEC ID number of contributing federal political committee.  Name of Employer Riverview Healthcare Association Receipt For: Primary General Other (specify) ▼  Date of Receipt  Transaction ID: 17292209  Amount of Each Receipt this Period  250.00	_	Primary General Other (specify) ▼	Aggregate	1 1 1 1 1 1 1	]
Crookston  FEC ID number of contributing federal political committee.  Name of Employer Riverview Healthcare Association Receipt For:  Primary General Other (specify) ▼  Amount of Each Receipt this Period  250.00  Amount of Each Receipt this Period  250.00	<b>).</b>	Ms. Debra K Boardman  Mailing Address 323 South Minnesota			06 30 7 2009
FEC ID number of contributing federal political committee.  Name of Employer Riverview Healthcare Association  Receipt For:  Primary General Other (specify)  Other (specify)  Aggregate Year-to-Date  250.00				•	
ciation Receipt For:  Primary Other (specify) ▼  Aggregate Year-to-Date  250.00			C		
Primary General Other (specify) ▼ 250.00		ciation	Presiden	nt and Chief Executive Office	r
SURTOTAL of Receipts This Page (ontional)		Primary General	Aggregate		]
CODITION Age (optional)		SUBTOTAL of Receipts This Page (optional)			1000.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 105 / 162 (check only one)  X 11a 11b 11c 12 13 14 15 16 17		
Any information copied from such Reports or for commercial purposes, other than usi  NAME OF COMMITTEE (In Full)  American Hospital Association P.	and Statements may not be sold or used by any person ng the name and address of any political committee to AC	n for the purpose of soliciting contributions solicit contributions from such committee.		
Full Name (Last, First, Middle Initial) Mr. Larry A. Schulz Mailing Address 7650 Edwinborou Suite 200		Date of Receipt  0 6 3 0 2 0 0 9		
City	State Zip Code	Transaction ID: 17292211		
<u>Minneapolis</u>	MN 55435-5978	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	250.00		
Name of Employer Catholic Health Initiativ- es	Occupation Sr. Vice President, Operations			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00			
Full Name (Last, First, Middle Initial)  Ms. Maureen Tarrant  Mailing Address 10101 Pidge Cat	n Parkway	Date of Receipt		
walling Address 10101 hlage dati	Mailing Address 10101 Ridge Gate Parkway			
City	State Zip Code	Transaction ID: 17292219		
Lone Tree	CO 80124-5522	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	1000.00		
Name of Employer Sky Ridge Medical Center	Occupation Chief Executive Officer			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00			
Full Name (Last, First, Middle Initial) Mr. Bruce Schroffel		Date of Receipt		
Mailing Address 12605 East 16th	Avenue	06 30 7 2009		
City	State Zip Code	Transaction ID: 17292226		
<u>Aurora</u>	CO 80045-7109	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	500.00		
Name of Employer University of Colorado Ho- spital	Occupation Chief Executive Officer			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00			
SUBTOTAL of Receipts This Page (option	nal)	1750.00		
TOTAL This Period (last page this line nu	umber only)			

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedu for each category of t Detailed Summary Pa	he (crieck only only)
A Oi	for commercial purposes, other than using the	atements may not be sold or used by a name and address of any political com	any person for the purpose of soliciting contributions mittee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
_	Full Name (Last, First, Middle Initial) Mr. Robert S. Austin		Date of Receipt
	Mailing Address 555 Prospect Avenue		06 30 2009
	City	State Zip Code	Transaction ID: 17292230
	Estes Park	CO 80517-6347	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	350.00
	Name of Employer Estes Park Medical Center	Occupation President	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼	350	.00
	Full Name (Last, First, Middle Initial) Ms. Katie Vaughan		Date of Receipt
	Mailing Address 506A East Howell Aver	nue	06 30 7 2009
	City	State Zip Code	Transaction ID: PR1034595122603
	Alexandria	VA 22301-1216	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Associate Director	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼	240	P/R Deduction (\$20.00 Wee-kly)
	Full Name (Last, First, Middle Initial) Ms. Melinda Reid Hatton		Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	V	06 30 7 2009
	City	State Zip Code	Transaction ID: PR1045726222603
	Washington	DC 20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	78.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Vice President & Gene	ral Counse
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	468	.00 P/R Deduction (\$39.00 Wee-kly)
Г			468.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 107 / 162 (check only one)    X
0	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may e name and ado	r not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC			
	Full Name (Last, First, Middle Initial) Mr. Stephen Mayfield			Date of Receipt
	Mailing Address One North Franklin St Suite 32139	treet		06 30 2009
	City Chicago	State IL	Zip Code 60606	Transaction ID: PR1302378922603  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33333	86.96
	Name of Employer American Hospital Associa- tion-Chicago Receipt For:  Primary General Other (specify) ▼	_ +	ce President Year-to-Date ▼ 391.32	P/R Deduction (\$43.48 Wee-kly)
	Full Name (Last, First, Middle Initial) Ms. Frances Margolin			Date of Receipt
	Mailing Address One North Franklin			06 30 4 2009
	City	State	Zip Code	Transaction ID: PR1347702722603
	Chicago	IL	60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice Pres	n sident, Operations HRET	
	Receipt For:	<del>, '</del>	Year-to-Date ▼	
	Primary General Other (specify) ▼		240.00	P/R Deduction (\$20.00 Wee-kly)
_	Full Name (Last, First, Middle Initial) Mr. James Wadzinski			Date of Receipt
	Mailing Address One North Franklin			0 6 3 0 2 0 0 9
	City	State	Zip Code	Transaction ID: PR1347703422603
	Chicago	IL	60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer American Hospital Associa- tion-Chicago Receipt For:		n sident Account Services Year-to-Date ▼	
	Primary General Other (specify) ▼	Aggregate	890.00	P/R Deduction (\$20.00 Wee-kly)
Γ.	SUBTOTAL of Receipts This Page (optional)			166.96

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 108 / 162 (check only one)  X 11a 11b 11c 12  13 14 15 16 1
,	any information copied from such Reports and S r for commercial purposes, other than using the	Statements may not be sold or used by any persename and address of any political committee t	con for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Mr. Jack A. Mackay		Date of Receipt
	Mailing Address One North Franklin		06 30 YYYYY
	City Chicago	State Zip Code IL 60606-3436	Transaction ID: PR1347703622603  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President & CIO	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  240.00	P/R Deduction (\$20.00 Wee-kly)
_	Full Name (Last, First, Middle Initial) Ms. Catherine D. Sewell		Date of Receipt
	Mailing Address One North Franklin		06 30 7 2009
	City	State Zip Code	Transaction ID: PR1347708422603
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	78.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Executive Director, ASHHRA	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	468.00	P/R Deduction (\$39.00 Wee-kly)
_	Full Name (Last, First, Middle Initial) Mr. John Slotman		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	W	06 30 7 2009
	City	State Zip Code	Transaction ID: PR1384065322603
	Washington	DC 20004-2802	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	78.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Associate Director, Federal Relation	S
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 468.00	P/R Deduction (\$39.00 Wee-kly)
Г	SUBTOTAL of Receipts This Page (optional) .	1	196.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate s for each catego Detailed Sumn	gory of the
, c	Any information copied from such Reports and S or for commercial purposes, other than using the	atements may not be sold or us name and address of any politic	sed by any person for the purpose of soliciting contributions cal committee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
. ∠ \.	Full Name (Last, First, Middle Initial) Ms. Stephanie H. Drake		Date of Receipt
	Mailing Address One North Franklin		06 30 7 2009
	City Chicago	State Zip Code IL 60606-3436	Transaction ID: PR1492459922603  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Associate Executive Dire	rector - ASHHRA
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	P/R Deduction (\$20.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Linda Fishman		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700		06 30 2009
	City Washington	State Zip Code DC 20004-2818	Transaction ID: PR327629122603
	FEC ID number of contributing federal political committee.	C 20004-2816	Amount of Each Receipt this Period  78.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Vice President, P	Public Policy
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	P/R Deduction (\$39.00 Wee-kly)
_	Full Name (Last, First, Middle Initial) Ms. Debbie F. Weiner		Date of Receipt
	Mailing Address 11004 Petersborough	Drive	06 30 2009
	City	State Zip Code	Transaction ID: PR327745922603
	Rockville  FEC ID number of contributing federal political committee.	MD 20852-3249	Amount of Each Receipt this Period  78.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Director, Grassroots Adv	lvocacy
	Receipt For:  Primary  General  Other (specify)	Aggregate Year-to-Date ▼	P/R Deduction (\$39.00 Wee-kly)
	SUBTOTAL of Receipts This Page (optional)		196.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 110 / 162 (check only one)    X
0	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements may not be sold or used by any pename and address of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Debra J. Stock		Date of Receipt
	Mailing Address 1022 S. Harvey Avenu	е	0 6 3 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Oak Park	State Zip Code IL 60304-2132	Transaction ID: PR327777822603  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	40.00
	Name of Employer American Hospital Associa- tion-Chicago Receipt For:  Primary General Other (specify) ▼	Occupation Vice President, Member Relations Aggregate Year-to-Date   240.00	P/R Deduction (\$20.00 Wee-kly)
_	Full Name (Last, First, Middle Initial) Mr. Neil J. Jesuele		Date of Receipt
	Mailing Address 1003 Kimberly Place		06 30 2009
	City	State Zip Code	Transaction ID: PR327801722603
	Great Falls	VA 22066-1546	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Washinot	Occupation Executive Vice President	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	240.00	P/R Deduction (\$20.00 Wee-kly)
_	Full Name (Last, First, Middle Initial) Ms. Pamela Austin Thompson, RN, MSN		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	N	06 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR327812022603
	Washington	DC 20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	78.00
	Name of Employer American Hospital Associa- tion-Washingt Receipt For:	Occupation Chief Executive Officer, AONE	
	Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 468.00	P/R Deduction (\$39.00 Weekly)
$\lceil$	SUBTOTAL of Receipts This Page (optional)		158.00

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 111 / 162 (check only one)    X   11a
ny information copied from such Reports and strangers of the result of the reports and strangers of the result of	Statements may not be sold or used by any poer name and address of any political committee	erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)		
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Joan H. Lewis		Date of Receipt
Mailing Address 6034 North 22nd Stre	et	06 30 7 2009
City	State Zip Code	Transaction ID: PR327831722603
Arlington	VA 22205-3408	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer American Hospital Associa-	Occupation Regional Executive	
tion-Washingt Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	240.00	P/R Deduction (\$20.00 Wee-kly)
Full Name (Last, First, Middle Initial) Ms. Ellen A. Pryga		Date of Receipt
Mailing Address 2401 Calvert Street, N Apt. 1008	IW	06 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: PR327851922603
Washington	DC 20008-2614	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Director, Policy Development	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	240.00	P/R Deduction (\$20.00)
Full Name (Last, First, Middle Initial) Mr. Mark Seklecki	1	Date of Receipt
Mailing Address 325 Seventh Street, N Suite 700	W	06 30 2009
City	State Zip Code	Transaction ID: PR327858022603
Washington	DC 20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	78.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Vice President, Political Affairs	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	468.00	P/R Deduction (\$39.00 Wee-kly)
IIRTOTAL of Receipts This Page (optional)		158.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 112 / 162 (check only one)    X
A 0	Any information copied from such Reports and a r for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Mr. John F. Barry		Date of Receipt
	Mailing Address One North Franklin		06 30 2009
	City Millis	State Zip Code MA 60606-3436	Transaction ID: PR327877822603
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 78.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Regional Executive	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 468.00	P/R Deduction (\$39.00 Wee-kly)
_	Full Name (Last, First, Middle Initial) Mr. George F. Bergstrom	I	Date of Receipt
	Mailing Address 130 North Garland Co #3002		06 30 2009
	City	State Zip Code	Transaction ID: PR327895722603
	Chicago  FEC ID number of contributing federal political committee.	IL 60602-4750	Amount of Each Receipt this Period 40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	P/R Deduction (\$20.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. Richard J. Umbdenstock	1	Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	IW	06 30 7 2009
	City	State Zip Code	Transaction ID: PR328132822603
	Washington  FEC ID number of contributing federal political committee.	DC 20004-2818	Amount of Each Receipt this Period  78.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation President and Chief Executive Office	r
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 468.00	P/R Deduction (\$39.00 Wee-kly)
Γ.	SUBTOTAL of Receipts This Page (optional) .	1	196.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 113 / 162 (check only one)    X   11a
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Barbara Lorsbach		Date of Receipt
	Mailing Address 204 7th Ave		06 30 7 2009
	City La Grange	State Zip Code IL 60525-6406	Transaction ID: PR328136922603  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	78.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Sr. Vice President, Member Relations	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 468.00	P/R Deduction (\$39.00 Wee-kly)
_	Full Name (Last, First, Middle Initial) Ms. Donna J. Melkonian		Date of Receipt
	Mailing Address 5545 North Wayne		06 30 7 2009
	City	State Zip Code	Transaction ID: PR328223822603
	Chicago FEC ID number of contributing federal political committee.	IL 60640-1318	Amount of Each Receipt this Period 78.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 468.00	P/R Deduction (\$39.00 Wee-kly)
_	Full Name (Last, First, Middle Initial) Dr. James D. Bentley, Ph.D.		Date of Receipt
	Mailing Address 13106 Vingle Lane		06 30 7 2009
	City Silver Spring	State Zip Code MD 20906	Transaction ID: PR328224922603
	FEC ID number of contributing federal political committee.	MD 20906	Amount of Each Receipt this Period  78.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Vice President	
	Receipt For:  Primary  General  Other (specify)	Aggregate Year-to-Date ▼ 468.00	P/R Deduction (\$39.00 Bi- Weekly)
Γ	SUBTOTAL of Receipts This Page (optional)	1	234.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 114 / 162 (check only one)    X   11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Ron O. Purcell		Date of Receipt
Mailing Address 1093 N. Faldo Way		06 / 30 / 4 2009
City <u>Eagle</u>	State         Zip Code           ID         83616-5369	Transaction ID: PR328241422603  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer American Hospital Associa- tion-Chicago	Occupation Regional Executive	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 240.00	P/R Deduction (\$20.00 Wee-kly)
Full Name (Last, First, Middle Initial) Mr. Richard J. Pollack	.	Date of Receipt
Mailing Address 3475 North Venice St	reet	06 30 YYYYY 2009
City	State Zip Code	Transaction ID: PR328260922603
Arlington	VA 22207-4446	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	78.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Executive Vice President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 468.00	P/R Deduction (\$39.00 Wee-kly)
Full Name (Last, First, Middle Initial) Mr. Richard H. Wade		Date of Receipt
Mailing Address 1221 Cavalier Road		06 30 7 2009
City Arnold	State Zip Code MD 21012-2126	Transaction ID: PR328310422603  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	78.00
Name of Employer American Hospital Association-Washingt Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Senior Vice President Strategic Company Aggregate Year-to-Date  468.00	mun P/R Deduction (\$39.00 Wee-kly)
		196.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 115 / 162 (check only one)  X 11a 11b 11c 12 13 14 15 16 1
A C	any information copied from such Reports and S r for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC			
	Full Name (Last, First, Middle Initial) Ms. Lori M. Schor			Date of Receipt
	Mailing Address 325 Seventh Street, N' Suite 700			06 30 2009
	City <u>Washington</u>	State DC	Zip Code 20004-2818	Transaction ID: PR328341822603  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		78.00
	Name of Employer American Hospital Associa- tion-Washingt Receipt For: Primary General Other (specify)		Political Action & Grassroot Year-to-Date  468.00	P/R Deduction (\$39.00 Wee-kly)
	Full Name (Last, First, Middle Initial) Ms. Carolyn Forcina			Date of Receipt
	Mailing Address 200 Clover Hill Court			06 30 7 2009
	City	State	Zip Code	Transaction ID: PR328511822603
	Yardley	<u>PA</u>	19067-5736	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		78.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Regional	n Executive	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		468.00	P/R Deduction (\$39.00 Wee-kly)
-	Full Name (Last, First, Middle Initial) Ms. Alicia N. Mitchell	1		Date of Receipt
	Mailing Address 1501 N. Harrison Street	et		06 30 YYYYY 2009
	City	State	Zip Code	Transaction ID: PR328512022603
	Arlington	VA	22205-2726	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer American Hospital Associa- tion-Washingt Receipt For:	<del>, '</del>	sident, Media Relations	
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00	P/R Deduction (\$20.00 Wee-kly)
	SUBTOTAL of Receipts This Page (optional)			196.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 116 / 162 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
A C	Any information copied from such Reports and S or for commercial purposes, other than using the	statements may not be sold or used by any person name and address of any political committee to s	for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
۷.	Full Name (Last, First, Middle Initial) Mr. Anthony J. Burke		Date of Receipt
	Mailing Address One North Franklin Av		06 30 7 2009
	Chicago	State Zip Code IL 60606	Transaction ID: PR328913322603
	Chicago  FEC ID number of contributing federal political committee.	IL 60606	Amount of Each Receipt this Period  88.00
	Name of Employer American Hospital Associa- tion	Occupation President & CEO, AHA Solutions, Inc.	_
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 396.00	P/R Deduction (\$44.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Rebecca Chickey		Date of Receipt
	Mailing Address One North Franklin St	reet	06 30 2009
	City	State Zip Code	Transaction ID: PR329013422603
	Chicago	IL 60606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation SPSA Director	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	240.00	P/R Deduction (\$20.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Dr. John R. Combes, MD		Date of Receipt
	Mailing Address One North Franklin		0 6 3 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR329071322603
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	78.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation President & Chief Operating Officer, C	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 468.00	P/R Deduction (\$39.00 Wee-kly)
		<b>&gt;</b>	206.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 117 / 162 (check only one)  X 11a 11b 11c 12  13 14 15 16 1
0	ny information copied from such Reports and S r for commercial purposes, other than using the	statements may not be sold or used by any per name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Robyn Cooke		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700		06 30 7 2009
	City <u>Washington</u>	State Zip Code DC 20004-2818	Transaction ID: PR329084422603  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Association-Washingt Receipt For: Primary General Other (specify)	Occupation Senior Associate Director  Aggregate Year-to-Date ▼  240.00	P/R Deduction (\$20.00 Wee-kly)
_	Full Name (Last, First, Middle Initial) Mr. W. Thomas Deweese		Date of Receipt
	Mailing Address 500 Interstate Bouleva	rd South	06 30 7 2009
	City	State Zip Code	Transaction ID: PR329215722603
	Nashville	TN 37210-4634	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	78.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation AHA Regional Executive	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	468.00	P/R Deduction (\$39.00 Wee-kly)
_	Full Name (Last, First, Middle Initial) Ms. Patricia Meersman		Date of Receipt
	Mailing Address One North Franklin		06 30 7 2009
	City	State Zip Code	Transaction ID: PR330343322603
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Chicago Receipt For:	Occupation Senior Director Member Relations  Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	Aggregate Year-to-Date V	P/R Deduction (\$20.00 Wee-kly)
Γ	SUBTOTAL of Receipts This Page (optional)	l	158.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate sch for each category Detailed Summan	y of the Circle
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements may not be sold or used name and address of any political	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Mr. Thomas Misfeldt		Date of Receipt
	Mailing Address One North Franklin		06 30 7 2009
	City Chicago	State Zip Code IL 60606-3436	Transaction ID: PR330411622603  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Associate Regional Execu	utive
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼		240.00 P/R Deduction (\$20.00 Bi- Weekly)
. –	Full Name (Last, First, Middle Initial) Mr. Paul N. Muraca		Date of Receipt
	Mailing Address 4960 138th Cricle Wes	t	06 30 7 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
	City	State Zip Code	Transaction ID: PR330475422603
	Apple Valley	MN 55124-9229	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	78.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Regional Executive	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼		468.00 P/R Deduction (\$39.00 Wee-kly)
_	Full Name (Last, First, Middle Initial) Ms. Jennifer E. Mallard		Date of Receipt
	Mailing Address 6109 North 9th Road		06 30 7 2009
	City	State Zip Code	Transaction ID: PR330534322603
	Arlington	VA 22205-1609	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	40.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Associate Director	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	240.00 P/R Deduction (\$20.00 Bi-Weekly)
Г	SUBTOTAL of Receipts This Page (optional)		158.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 119 / 162 (check only one)    X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Gene O'Dell		Date of Receipt
Mailing Address One North Franklin		06 30 2009
City	State Zip Code	Transaction ID: PR330547722603
Chicago	IL 60606-3436	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer American Hospital Associa-	Occupation Vice President, Strategic Planning	
tion-Chicago Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	240.00	P/R Deduction (\$20.00 Wee-kly)
Full Name (Last, First, Middle Initial) Ms. Eileen O'Keefe		Date of Receipt
Mailing Address 172 Atteridge		06 30 7 2009
City	State Zip Code	Transaction ID: PR330549222603
Lake Forest	IL 60045-1715	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	94.00
Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President, Constituency Section	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	348.00	P/R Deduction (\$47.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Mr. Walter J. Reiter	<u> </u>	Date of Receipt
Mailing Address 325 Seventh Street, N' Suite 700	W	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: PR330776122603
Washington	DC 20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation V.P., Advocacy & Member Communic	cations
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 240.00	P/R Deduction (\$20.00 )
SUBTOTAL of Receipts This Page (optional)		174.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 120 / 162 (check only one)    X
A C	ny information copied from such Reports and sor for commercial purposes, other than using the	Statements may not be sold or used by any person ename and address of any political committee to	on for the purpose of soliciting contributions oscilcit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
. <u>/</u>	Full Name (Last, First, Middle Initial) Ms. Darlene S. Vanderbush		Date of Receipt
	Mailing Address 26 West Glendale Ave	).	0 6 3 0 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Alexandria	State Zip Code VA 22301-2402	Transaction ID: PR331304222603  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	40.00
	Name of Employer American Hospital Association-Washingt Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Director Advocacy and Public Policy Aggregate Year-to-Date  240.00	Op P/R Deduction (\$20.00 Wee-kly)
	Full Name (Last, First, Middle Initial) Mr. Alex R. White, Sr.		Date of Receipt
	Mailing Address PO Box 15587		06 30 2009
	City	State Zip Code	Transaction ID: PR331416022603
	Austin	TX 78761-5587	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	116.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Regional Executive	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	696.00	P/R Deduction (\$58.00 Wee-kly)
	Full Name (Last, First, Middle Initial) Mr. Donald May		Date of Receipt
	Mailing Address 521 Great Falls St.		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR331533222603
	Falls Church	VA 22046-2613	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	78.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Vice President, Policy	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 468.00	P/R Deduction (\$39.00 Wee-kly)
	SUBTOTAL of Receipts This Page (optional) .		234.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 121 / 162 (check only one)    X
A C	any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Elizabeth Summy		Date of Receipt
	Mailing Address One North Franklin		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Chicago	State Zip Code IL 60606-3436	Transaction ID: PR346168122603  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	39.84
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President, PMG	
	Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼  221.28	P/R Deduction (\$19.92 Wee-kly)
_	Full Name (Last, First, Middle Initial) Ms. Kristin Welsh		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	W	06 30 YYYY 2009
	City	State Zip Code	Transaction ID: PR517619722603
	Washington	DC 20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	78.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Vice President Executive Branch Relation	ati
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	468.00	P/R Deduction (\$39.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. Carlos Jackson		Date of Receipt
	Mailing Address 325 Seventh Street, N	W	06 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR566280922603
	Washington	DC 20004-2802	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Washingt Receipt For:	Occupation Associate Director, Federal Relations Aggregate Year-to-Date	8
	Primary General Other (specify)	Aggregate Year-to-Date   240.00	P/R Deduction (\$20.00 Wee-kly)
Γ	SUBTOTAL of Receipts This Page (optional) .		157.84

[	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS  Any information copied from such Reports and S	Statements ma	Use separate schedule for each category of th Detailed Summary Pag y not be sold or used by ar	e(s) e ge	FOR LINE NUMBER: PAGE 122 / 162 (check only one)    X
	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	e name and ad	dress of any political comn	nittee to so	olicit contributions from such committee.
Α.	Full Name (Last, First, Middle Initial) Ms. Ashley B. Thompson Mailing Address 606 S. Royal St.  City	State	Zip Code		Date of Receipt    M
	Alexandria  FEC ID number of contributing federal political committee.	VA C	22314-4142		Amount of Each Receipt this Period  40.00
	Name of Employer American Hospital Association-Washingt Receipt For:  Primary  Other (specify) ▼	Occupation Director, Aggregate		00	P/R Deduction (\$20.00)
В.	Full Name (Last, First, Middle Initial) Ms. Lisa Kidder Hrobsky Mailing Address 325 Seventh Street, N Suite 700  City Washington  FEC ID number of contributing	State DC	Zip Code 20004-2818		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	federal political committee.  Name of Employer American Hospital Association-Washingt Receipt For:  Primary  General  Other (specify)	1 '	on sident, Legislative Affa e Year-to-Date ▼ 206.0		P/R Deduction (\$21.00 Wee-kly)

SUBTOTAL of Receipts This Page (optional)	<b>•</b>	82.00
TOTAL This Period (last page this line number only)	<b>•</b>	127671.15

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 123 / 162 (check only one)  11a 11b 11c X 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any per name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Wisconsin Hospital Association Federal PAC		Date of Receipt
Mailing Address 5510 Research Park D		06 05 7 2009
City Madison	State Zip Code WI 53725-9038	Transaction ID: 17242019  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<b>C</b> C00359455	1000.00
Name of Employer	Occupation	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial) Wisconsin Hospital Association Federal PAC Mailing Address 5510 Research Park D	rive	Date of Receipt
City	State Zip Code	0 6 1 0 2 0 0 9 Transaction ID: 17255891
<u>Madison</u>	WI 53725-9038	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<b>C</b> C00359455	1050.00
Name of Employer	Occupation	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 2050.00	
Full Name (Last, First, Middle Initial) Health Alliance of PA PAC - Federal		Date of Receipt
Mailing Address Post Office Box 8600		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17287383
<u>Harrisburg</u>	PA 17105-8600	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<b>C</b> C00128082	10000.00
Name of Employer	Occupation	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 50000.00	
SUBTOTAL of Receipts This Page (optional)		12050.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 124 / 162 (check only one)  11a 11b 11c X 12 13 14 15 16 17
	d Statements may not be sold or used by any pe the name and address of any political committee	
NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
Full Name (Last, First, Middle Initial) PAC of Missouri Hospital Association Mailing Address P.O. Box 60		Date of Receipt  0 6 3 0 7 2 0 0 9
City	State Zip Code	Transaction ID: 17292223
Jefferson City	MO 65102	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<b>C</b> C00289777	500.00
Name of Employer	Occupation	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	•	500.00
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		by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAG		
Full Name (Last, First, Middle Initial) Cantor For Congress  Mailing Address P. O. Box 17813  City	State Zip Code	Date of Receipt    M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Richmond	VA 23226	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<b>C</b> C00355461	1000.00
Name of Employer	Occupation	
Receipt For: 2010  X Primary General  Other (specify)	Aggregate Year-to-Date ▼	000.00 Refund

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NAME OF COMMITTEE (In Full)  American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Citibank, F.S.B.  Mailing Address 1400 G Street, NW			Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 17346755
Washington	DC	20005	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		190.38
Name of Employer	Occupatio	n	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1870.35	Interest

SUBTOTAL of Receipts This Page (optional)	<b>•</b>	190.38
TOTAL This Period (last page this line number only)	•	190.38

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	Full Name (Last, First, Middle Initial) Tallatchee Creek PAC									172 ement	27184	3	
	Mailing Address 3343 Allendale Place						0 <sup>M</sup> 6	M /	D 0	9 /	Y	ž 0 ŏ s	9 <sup>Y</sup>
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	City New Castle			State DE	Zip Code 19720				Amou	nt o	f Each	Disb	urser			erio
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Transaction ID: 17271847  Detailing Address PO Box 37  Tor each category of the Detailed Summary Page  Tor each category of the Detailed Summary Page  21b 22	CHEDULE B (FEC Form 3X)	Use separate schedule(s	FOR LINE (check on	E NUMBER: PAGE 129 / 16:
NAME OF COMMITTEE (In Full) American Hospital Association PAC  Full Name (Last, First, Middle Initial) Levin For Congress  Malling Address PO Box 37  City Purpose of Disbursement Contribution Candidate Name Rep. Sander M. Levin  Office Sought:  X House Senate President Mill A8066  Purpose of Disbursement Contribution Candidate Name Rep. Sander M. Levin  Office Sought:  X House Senate President Mill A8066  Purpose of Disbursement Contribution  Candidate Name Rep. Sander M. Levin  Office Sought:  X House Senate President Mill A8066  Purpose of Disbursement Contribution  Candidate Name Rep. Sander M. Levin  Office Sought:  X House Senate President Mill A8066  Purpose of Disbursement Contribution  Candidate Name Rep. Sander M. Levin  Office Sought:  X House Senate President Mill A8066  Purpose of Disbursement Contribution  Candidate Name Rep. Sander M. Levin  Office Sought:  X House President Contribution  Candidate Name Rep. State Xip Code Mill A8066  Purpose of Disbursement Contribution  Candidate Name President State: Mill District: 12  Full Name (Last, First, Middle Initial) Levin For Congress  Mailing Address  4201 Northview Dr, Ste 307  City Bowle Mill Zip Code Mill Zip		Detailed Summary Page	21b 27	22 X 23 24 25 28 28a 28b 28c 29
American Hospital Association PAC  Full Name (Last, First, Middle Initial) Levin For Congress  Malling Address PO Box 37  City Roseville MI Association Candidate Name Rep. Sander M. Levin  Office Sought: State: MI District: 12  Full Name (Last, First, Middle Initial) Levin For Congress  Malling Address PO Box 37  Contribution  Contribu				
Levin For Congress  Mailing Address PO Box 37  City State MI 48066  Purpose of Disbursement Contribution Candidate Name Rep. Sander M. Levin  Office Sought: X House President State: MI Disbursement For: 2010 Senate President State: MI Disbursement For: 2010 City State MI 48066  Purpose of Disbursement Contribution  City State MI 48066  City State MI 48066  Purpose of Disbursement Contribution  Candidate Name Rep. Sander M. Levin  Office Sought: X House President State: MI Disbursement For: 2010 Contribution  Candidate Name Rep. Sander M. Levin  Office Sought: X House President State: MI Disbursement For: 2010 Candidate Name Rep. Sander M. Levin  Office Sought: X House President State: MI Disbursement For: 2010 Contribution  Candidate Name Rep. Sander M. Levin  Other (specify) ▼  Transaction ID: 17271848 Date of Disbursement IN Type  Amount of Each Disbursement IN Type  Contribution  Contribution  Contribution  Contribution  Transaction ID: 17271849 Date of Disbursement IN Type  Contribution  Contribution  Contribution  Candidate Name Rep. State MD 20716  Purpose of Disbursement Contribution  Candidate Name Rep. Stenty H. Hoyer  Office Sought: X House Senate President Senate President Disbursement For: 2010 Contribution  Candidate Name Rep. Stenty H. Hoyer  Office Sought: X House Senate President Disbursement For: 2010 Contribution	NAME OF COMMITTEE (In Full)			<u></u>
City Roseville MI 48066  Purpose of Disbursement Contribution  Candidate Name Rep. Sander M. Levin  Office Sought: X House Senate President State: MI District: 12  Full Name (Last, First, Middle Initial)  Candidate Name Rep. Sander M. Levin  Other (specify) ▼  State Zip Code MI 48066  Purpose of Disbursement Contribution  Candidate Name Rep. Sander M. Levin  Office Sought: X House Senate President State: MI District: 12  Full Name (Last, First, Middle Initial)  Levin For Congress  Mailing Address PO Box 37  City State Zip Code MI 48066  Purpose of Disbursement Contribution  Candidate Name Rep. Sander M. Levin  Office Sought: X House President Senate Number State: MI District: 12  Full Name (Last, First, Middle Initial)  Hoyer For Congress  Mailing Address 4201 Northview Dr, Ste 307  City State Zip Code MD 20716  Purpose of Disbursement Contribution  Cardidate Name Rep. Steny H. Hoyer  Office Sought: X House Senate President Verificate President Verificate Number Senate President Verificate Number Senate President Verificate Number Senate President Verificate Other (specify) ▼  Contribution  Contribution  Cardidate Name Rep. Steny H. Hoyer  Office Sought: X House Senate President Verificate Number Senate President Verificate Number Senate President Verificate Number Senate President Contribution Contribution Contribution Verificate Number Senate President Verificate Number Senate President Verificate Number Senate President Verificate Number Senate President Contribution Contribution Contribution Contribution Contribution Verificate Number Senate President Verificate Number Senate President Verificate Number Senate President Verificate Number Senate Verificate Number Senate President Verificate Number Senate Verificate	,			_
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Senate President State: MI District: 12  Full Name (Last, First, Middle Initial) Levin For Congress  Mailing Address PO Box 37  City State Zip Code MI 48066  Purpose of Disbursement Contribution  Candidate Name Rep. Sander M. Levin  Office Sought: X House Primary X General Other (specify) ▼  City State Zip Code MI 48066  Purpose of Disbursement Contribution				
Full Name (Last, First, Middle Initial) Levin For Congress  Mailing Address PO Box 37  City State Zip Code MI 48066  Purpose of Disbursement Contribution Candidate Name Rep. Sander M. Levin  Office Sought: X House Primary X General Primary X General Primary President  State: MI District: 12  Full Name (Last, First, Middle Initial) Hoyer For Congress  Mailing Address 4201 Northview Dr, Ste 307  City State Zip Code MD 20716  Purpose of Disbursement Contribution  City State Zip Code MD 20716  Purpose of Disbursement Contribution  Candidate Name Rep. Steny H. Hoyer  Office Sought: X House Disbursement For: 2010  Contribution  Candidate Name Rep. Steny H. Hoyer  Office Sought: X House Senate Primary Repersident  State Zip Code MD 20716  Contribution  Candidate Name Rep. Steny H. Hoyer  Office Sought: X House Senate Primary General President  Other (specify) Type  Contribution	Senate President	X Primary General		Contribution
Levin For Congress  Mailing Address PO Box 37  City State Zip Code MI 48066  Purpose of Disbursement Contribution  Candidate Name Rep. Sander M. Levin  Office Sought: X House Senate Primary X General Primary X General Other (specify) ▼  Full Name (Last, First, Middle Initial) Hoyer For Congress  Mailing Address 4201 Northview Dr, Ste 307  City State Zip Code MD 20716  Purpose of Disbursement Contribution  Candidate Name Rep. Steny H. Hoyer  Office Sought: X House Disbursement For: 2010 Other (specify) ▼  Contribution  Transaction ID: 17271849 Date of Disbursement For: 2010 Other (specify) ▼  Amount of Each Disbursement this Period Primary X General Date of Disbursement Tother Date of Disbursement Tother Date of Disbursement Tother Date of Disbursement Tother Date of Disbursement Unit Da				
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	Mailing Address PO Box 1682											
	City Burlington	State Zip Code VT 05402				Amou	ınt of	Each	Disbu		nt this F	-
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	Chris Lee For Congress						of Di	sburse	ement		Y Y	Υ
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	Full Name (Last, First, Middle Initial) Mike McMahon For Congress					Date	of Di	sburse	ement			
	Mailing Address 66 Arnold Street					0 <sup>M</sup> 6	M /	0	9 /	Y	ž 0 ŏ 9	) <sup>Y</sup>
	City Staten Island	State Zip Code NY 10301				Amou	ınt of	Each	Disbu		nt this F	-
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<u>/</u>	Full Name (Last, First, Middle Initial) Wasserman-Schultz For Congres	SS			Transaction ID: 17271853 Date of Disbursement
	Mailing Address 1071 Twin Bran	nch Ln			06 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
	City Weston	State FL	Zip Code 33326		Amount of Each Disbursement this Period
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	Rep. Debbie Wasserman-Schultz Office Sought: X House	Disbursement For:	2010	Category/ Type	
	Senate President State: FL District: 20	X Primary Other (sp	General		Contribution
	Full Name (Last, First, Middle Initial) Marcia Fudge for Congress				Transaction ID: 17271854 Date of Disbursement
	Mailing Address 3729 Silsby Ro	ad			$\begin{bmatrix} \begin{smallmatrix} M & G & M \\ O & G & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D & D \\ O & O & D \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ Z & O & O & O \end{bmatrix}$
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	University Heights	OH	44118		
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	Purpose of Disbursement Contribution Candidate Name Rep. Marcia Fudge Office Sought:  X House Senate President	Disbursement For:	2010 General	Category/	Contribution  Transaction ID: 17271855 Date of Disbursement
	Purpose of Disbursement Contribution Candidate Name Rep. Marcia Fudge Office Sought:  X House Senate President State: OH District: 11 Full Name (Last, First, Middle Initial)	Disbursement For:	2010 General	Category/	Contribution  Transaction ID: 17271855
	Purpose of Disbursement Contribution  Candidate Name Rep. Marcia Fudge  Office Sought:  X House Senate President  State: OH District: 11  Full Name (Last, First, Middle Initial) Lynn Jenkins For Congress	Disbursement For:	2010 General	Category/	Contribution  Transaction ID: 17271855 Date of Disbursement  M M D D D Y Y Y Y O Y 9  Amount of Each Disbursement this Perior
	Purpose of Disbursement Contribution Candidate Name Rep. Marcia Fudge Office Sought:  X House Senate President State: OH District: 11  Full Name (Last, First, Middle Initial) Lynn Jenkins For Congress  Mailing Address P.O. Box 1441  City Topeka  Purpose of Disbursement Contribution	Disbursement For:  X Primary Other (sp	2010 General Decify) ▼	Category/ Type	Contribution  Transaction ID: 17271855  Date of Disbursement  M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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City Clarks Summit	State Zip Code PA 18411			Amount	of Each	Disburse	-	-	eriod
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Mailing Address 2000 Market Street Suite	500			06	<sup>/</sup> DO	9 /	ž0	ŏ 9	Y
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Mailing Address 198 Park Road				06	<sup>/</sup> D0	9 /	Ž0	ŏ9	Y
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<u>/</u>	Full Name (Last, First, Middle Initial) Peters For Congress				Transaction ID: 17273443 Date of Disbursement
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	City Bloomfield Hills	State MI	Zip Code 48303		Amount of Each Disbursement this Period
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SCHEDULE B (FEC Form 3X)	Use separate schedule	(s)	FOR LINE			PAGE 137	' / 162
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Full Name (Last, First, Middle Initial) Gillibrand For Senate			Transaction ID: 17288411 Date of Disbursement
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Wyden For Senate  Mailing Address PO Box 3498			Date of Disbursement  O 6
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Portland	OR 97208		
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City Federal Way	State Zip Code WA 98093		Amount of Each Disbursement this Period
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Contribution Candidate Name		011	
Rep. Adam Smith		Category/ Type	
Senate President	xsement For: 2010 X Primary General Other (specify)		Contribution
State: WA District: 09			
Full Name (Last, First, Middle Initial) PAC to the Future			Transaction ID: 17294685  Date of Disbursement
Mailing Address 268 Bush Street PMB 3230			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City San Francisco	State Zip Code CA 94104		Amount of Each Disbursement this Period
Purpose of Disbursement	0/1 04104	<u> </u>	5000.00
2009 Contribution  Candidate Name		011 Category/	
PAC to the Future  Office Sought: House Disbu	rsement For:	Type	
Senate President State: District:	Primary General Other (specify) ▼		2009 Contribution
Full Name (Last, First, Middle Initial) John Sullivan For Congress Inc			Transaction ID: 17296056 Date of Disbursement
Mailing Address Post Office Box 47084	0		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Tulsa	State Zip Code OK 74147		Amount of Each Disbursement this Perio
Purpose of Disbursement Contribution		011	1000.00
Candidate Name Rep. John Sullivan		Category/ Type	
Office Sought: X House Disbu Senate President	rsement For: 2010  X Primary General Other (specify)	, ype	Contribution
State: OK District: 01			
	J)		8500.00

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					for the purpose of soliciting contributions blicit contributions from such committee
	NAME OF COMMITTEE (In Full) American Hospital Association P		, p		
<b></b>	Full Name (Last, First, Middle Initial) Grassley Committee Inc				Transaction ID: 17296534 Date of Disbursement
	Mailing Address PO Box 1000				06 7 24 7 2009
	City Des Moines	State IA	Zip Code 50304		Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution Candidate Name			011	2000.00
	Sen. Charles E. Grassley  Office Sought: House	Disbursement For:	2010	Category/ Type	
	X Senate President	X Primary Other (spe	General		Contribution
	State: IA District:  Full Name (Last, First, Middle Initial)  Kathy Dahlkemper For Congress				Transaction ID: 17296662 Date of Disbursement
	Mailing Address PO Box 1045				$\begin{bmatrix} \begin{smallmatrix} M & G & M \\ O & G \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & Z \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ D & D & D \end{smallmatrix} \end{bmatrix} $
	City Erie	State PA	Zip Code 16512		Amount of Each Disbursement this Period
	Purpose of Disbursement			011	1000.00
	Contribution			011	
	Contribution Candidate Name Rep. Kathleen A. Dahlkemper			Category/ Type	
	Candidate Name Rep. Kathleen A. Dahlkemper  Office Sought: X House Senate President	Disbursement For:  X Primary Other (spe	2010 General ecify) <b>▼</b>	Category/	Contribution
	Candidate Name Rep. Kathleen A. Dahlkemper  Office Sought: X House Senate President	X Primary	General	Category/	Transaction ID: 17296794 Date of Disbursement
	Candidate Name Rep. Kathleen A. Dahlkemper  Office Sought:  X House Senate President  State: PA District: 03  Full Name (Last, First, Middle Initial)	X Primary Other (spe	General	Category/	Transaction ID: 17296794
	Candidate Name Rep. Kathleen A. Dahlkemper  Office Sought:  X House Senate President  State: PA District: 03  Full Name (Last, First, Middle Initial)  Castor For Congress	X Primary Other (spe	General	Category/	Transaction ID: 17296794 Date of Disbursement  M M M D D D D Y Y Y Y Y Y Y Y Y Y Y Y Y
	Candidate Name Rep. Kathleen A. Dahlkemper  Office Sought: X House Senate President  State: PA District: 03  Full Name (Last, First, Middle Initial)  Castor For Congress  Mailing Address 301 W. Platt State  City Tampa  Purpose of Disbursement Contribution	X Primary Other (spe	General ecify) ▼  Zip Code	Category/ Type	Transaction ID: 17296794 Date of Disbursement  M M M D D D D Y Y Y Y Y Y Y Y Y Y Y Y Y
	Candidate Name Rep. Kathleen A. Dahlkemper  Office Sought: X House Senate President State: PA District: 03  Full Name (Last, First, Middle Initial) Castor For Congress  Mailing Address 301 W. Platt St  City Tampa  Purpose of Disbursement Contribution Candidate Name Rep. Katherine Castor	X Primary Other (spe	General ecify) ▼  Zip Code 33606	Category/ Type	Transaction ID: 17296794 Date of Disbursement  M M M
	Candidate Name Rep. Kathleen A. Dahlkemper  Office Sought: X House Senate President  State: PA District: 03  Full Name (Last, First, Middle Initial)  Castor For Congress  Mailing Address 301 W. Platt State  City Tampa  Purpose of Disbursement Contribution  Candidate Name	X Primary Other (spe	General ecify) ▼  Zip Code 33606  2010 General	Category/ Type  011 Category/	Transaction ID: 17296794 Date of Disbursement  M M M / D D M / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

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<u>/</u>	•								ı						
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Ī	Mailing Address	PO Box 390							0	6 <sup>M</sup>	<sup>/</sup> 2	24	Y 2	2 0 0 9	, `
	City Waterloo		St I <i>F</i>	ate \	Zip Code 50704				Am	ount o	f Each	Disbur			
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	Candidate Name Rep. Bruce Bra		1				tego Type	-							
	Office Sought:	X House Senate President		ent For: Primary Other (spe	2010 General				Con	tribut	ion				
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Ī	Mailing Address	120 Maryland A	Avenue, NE						O	6 <sup>M</sup>	<sup>/</sup> 2	26	Y	2 0 ŏ 9	) <sup>Y</sup>
	City Washington			ate C	Zip Code 20002				Am	ount o	f Each	Disbur	semer	nt this F	Peric
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	BRIDGE PAC	not, Middle milaly							Dat	e of D	isburs	: 172 ement			Y
	Mailing Address	499 South Cap Suite 114	itol St., SW						0	6	2	26	2	2 0 0 9	)
	City Washington			ate C	Zip Code 20003				Am	ount o	f Each	Disbur			
2	Purpose of Disbur 2009 Contribution	sement					011						25	500.00	1
	Candidate Name BRIDGE PAC						tego Type	-							
	Office Sought: State:	House Senate President District:		ent For: Primary Other (spe	General ecify) ▼				200	9 Cor	ntribu	tion			
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$\sum_{i=1}^{n}$	NAME OF COMMITTEE (In Full) American Hospital Association PAC		oo or arry portion		
	Full Name (Last, First, Middle Initial) Mikulski For Senate Committee			Transaction ID: 17297252 Date of Disbursement	
	Mailing Address P O B 13147				$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City Baltimore	State MD	Zip Code 21203		Amount of Each Disbursement this Perio
	Purpose of Disbursement Contribution			011	2500.00
	Candidate Name Sen. Barbara A. Mikulski	Salar and Tarr	0010	Category/ Type	
	X Senate President	Disbursement For:  X Primary Other (spe	2010 General ecify) ▼		Contribution
	State: MD District:  Full Name (Last, First, Middle Initial)  Blumenauer For Congress				Transaction ID: 17297448 Date of Disbursement
	Mailing Address 830 Ne Holladay,	#105		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 0 & G \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & G \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{smallmatrix} \end{bmatrix}$	
	City	State	Zip Code		Amount of Each Disbursement this Period
	Portland	OR	97232		
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	Purpose of Disbursement	OR	97232	011 Category/ Type	4000.00
	Purpose of Disbursement Contribution Candidate Name Rep. Earl Blumenauer	OR  Disbursement For:  X Primary Other (spe	2010 General	Category/	4000.00  Contribution
	Purpose of Disbursement Contribution Candidate Name Rep. Earl Blumenauer  Office Sought:  X House Senate President	Disbursement For:	2010 General	Category/	Contribution  Transaction ID: 17297640 Date of Disbursement
	Purpose of Disbursement Contribution Candidate Name Rep. Earl Blumenauer  Office Sought: X House Senate President State: OR District: 03  Full Name (Last, First, Middle Initial)	Disbursement For:	2010 General	Category/	Contribution  Transaction ID: 17297640
	Purpose of Disbursement Contribution Candidate Name Rep. Earl Blumenauer  Office Sought: X House Senate President State: OR District: 03  Full Name (Last, First, Middle Initial) Childers For Congress	Disbursement For:	2010 General	Category/	Contribution  Transaction ID: 17297640 Date of Disbursement  M M M D D D D Y Y Y Y O Y 9 Y  Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution Candidate Name Rep. Earl Blumenauer  Office Sought:  X House Senate President State: OR District: 03  Full Name (Last, First, Middle Initial) Childers For Congress  Mailing Address PO Box 177  City Booneville Purpose of Disbursement Contribution	Disbursement For:  X Primary Other (spe	2010 General ecify) ▼	Category/ Type	Contribution  Transaction ID: 17297640 Date of Disbursement  0 6
	Purpose of Disbursement Contribution Candidate Name Rep. Earl Blumenauer  Office Sought: X House Senate President State: OR District: 03  Full Name (Last, First, Middle Initial) Childers For Congress  Mailing Address PO Box 177  City Booneville  Purpose of Disbursement Contribution Candidate Name Rep. Travis Wayne Childers	Disbursement For:  X Primary Other (spe	2010 General ecify) ▼ Zip Code 38829	Category/ Type	Contribution  Transaction ID: 17297640 Date of Disbursement  M M D D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Purpose of Disbursement Contribution Candidate Name Rep. Earl Blumenauer  Office Sought: X House Senate President State: OR District: 03  Full Name (Last, First, Middle Initial) Childers For Congress  Mailing Address PO Box 177  City Booneville Purpose of Disbursement Contribution Candidate Name Rep. Travis Wayne Childers	Disbursement For:  X Primary Other (spe	2010 General ecify) ▼  Zip Code 38829  2010 General	Category/ Type  011 Category/	Contribution  Transaction ID: 17297640 Date of Disbursement  M M D D D D D D D D D D D D D D D D D

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	EMIZED DISBURSEMEN	TS for each	ch category of the ed Summary Page	(check or 21b 27	22   X 23   24   25   28a   28b   28c   29			
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	NAME OF COMMITTEE (In Full) American Hospital Association F		, , , , , , , , , , , , , , , , , , , ,					
<u>/</u>	Full Name (Last, First, Middle Initial) Patrick Murphy For Congress		Transaction ID: 17297821 Date of Disbursement					
	Mailing Address P.O. Box 868			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$				
	City Levittown	State PA	Zip Code 19058		Amount of Each Disbursement this Period			
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	Rep. Patrick Murphy  Office Sought: X House	Category/ Type	_					
	Senate President State: PA District: 08	Disbursement For X Primary Other (s			Contribution			
	Full Name (Last, First, Middle Initial) Patrick Murphy For Congress				Transaction ID: 17298000 Date of Disbursement			
	Mailing Address P.O. Box 868		$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & G \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & G \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ D & D & G \end{smallmatrix} \end{bmatrix} $					
	City	State	Zip Code		Amount of Each Disbursement this Perio			
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	Levittown Purpose of Disbursement Contribution			011	1000.00			
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	Levittown  Purpose of Disbursement Contribution  Candidate Name Rep. Patrick Murphy  Office Sought:  X House Senate President	PA  Disbursement For Primary	19058	Category/				
	Levittown  Purpose of Disbursement Contribution  Candidate Name Rep. Patrick Murphy  Office Sought:  X House Senate President	PA  Disbursement For Primary	19058  r: 2010  X General	Category/	Contribution  Transaction ID: 17298123 Date of Disbursement			
	Levittown  Purpose of Disbursement Contribution  Candidate Name Rep. Patrick Murphy  Office Sought: X House Senate President  State: PA District: 08  Full Name (Last, First, Middle Initial)	PA  Disbursement For Primary	19058  r: 2010  X General	Category/	Contribution  Transaction ID: 17298123			
	Levittown  Purpose of Disbursement Contribution  Candidate Name Rep. Patrick Murphy  Office Sought: X House Senate President State: PA District: 08  Full Name (Last, First, Middle Initial) Moore For Congress	PA  Disbursement For Primary	19058  r: 2010  X General	Category/	Contribution  Transaction ID: 17298123 Date of Disbursement  M 6 M / D 2 6 / Y 2 0 0 9 Y  Amount of Each Disbursement this Period			
	Levittown  Purpose of Disbursement Contribution  Candidate Name Rep. Patrick Murphy  Office Sought: X House Senate President  State: PA District: 08  Full Name (Last, First, Middle Initial) Moore For Congress  Mailing Address PO Box 16646  City Milwaukee  Purpose of Disbursement Contribution	Disbursement For Primary Other (s	19058  r: 2010  X General specify) ▼  Zip Code	Category/ Type	Contribution  Transaction ID: 17298123 Date of Disbursement  M M M D D D D Y Z O O 9			
	Levittown  Purpose of Disbursement Contribution  Candidate Name Rep. Patrick Murphy  Office Sought: X House Senate President  State: PA District: 08  Full Name (Last, First, Middle Initial) Moore For Congress  Mailing Address PO Box 16646  City Milwaukee  Purpose of Disbursement Contribution  Candidate Name Rep. Gwen Moore	Disbursement For Primary Other (s	19058  r: 2010  X General specify) ▼  Zip Code 53216	Category/ Type	Contribution  Transaction ID: 17298123 Date of Disbursement  M M D D D D Y Y Y Y O Y 9 Y  Amount of Each Disbursement this Perio			
	Levittown  Purpose of Disbursement Contribution  Candidate Name Rep. Patrick Murphy  Office Sought: X House Senate President State: PA District: 08  Full Name (Last, First, Middle Initial) Moore For Congress  Mailing Address PO Box 16646  City Milwaukee  Purpose of Disbursement Contribution  Candidate Name	Disbursement For Other (s  State WI  Disbursement For X  Primary	19058  T: 2010  X General specify) ▼  Zip Code 53216	Category/ Type  011 Category/	Transaction ID: 17298123 Date of Disbursement  M M M D D D D Y Y Y Y O Y O Y O O O O O O O O			

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s) for each category of the Detailed Summary Page			FOR LINE			INE NUMBER: PAGE 159 / 16								2
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NAME OF COMMITTEE (In Full)	ie and addres	ss or any pontical	COIII	1111	illee to s	SOIIC	it contr	ibuti	ions ire	om suc	JII C	OHIII	nillee		
American Hospital Association PAC															
Full Name (Last, First, Middle Initial) 21st Century PAC							Transaction ID: 17307967 Date of Disbursement								
Mailing Address 1155 21st Street NW							0 6 M / D 3 0 / Y 2 0 0 9 Y								
City Washington	State DC	Zip Code 20036					Amou	nt o	f Each	Disbu	rsei	men	t this	Perio	od
Purpose of Disbursement 2009 Contribution			Г	0	11			_				40	00.00	)	
Candidate Name 21st Century PAC					egory/ ype										
Office Sought: House Disburs Senate President State: District:	ement For: Primary Other (spe	General cify) ▼					2009	Cor	ntribut	tion					
Full Name (Last, First, Middle Initial)							Trans				308	028			
Yarmuth For Congress							M	of Di	isburse		Y	Y	Y	Υ	
Mailing Address 1819 Brownsboro Road Suite 100						06 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0									
City Louisville	State KY	Zip Code 40202					Amou	nt o	f Each	Disbu	rsei				od
Purpose of Disbursement Contribution		011				2000.00									
Candidate Name Rep. John A. Yarmuth					egory/ ype										
9 1	ement For: Primary Other (spe	2010 General cify)					Contri	ibut	ion						
Full Name (Last, First, Middle Initial)							Trans	acti	on ID:	173	308	239			
Yarmuth For Congress								of Di	isburse		V	· · ·	V	V	
Mailing Address 1819 Brownsboro Road Suite 100							0 6	IVI	′	0 /	Ľ	2	o ŏ	€ '	
City Louisville	State KY	Zip Code 40202					Amou	nt o	f Each	Disbu	rsei	men	t this	Perio	od
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Candidate Name Rep. John A. Yarmuth			Category/ Type												
Senate President	ement For: Primary Other (spe	2010 X General cify) ▼					Contri	ibut	ion						
State: KY District: 03															
SUBTOTAL of Disbursements This Page (optional)					▶							650	0.00	)	

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only	NUMBER: PAGE 160 / 162		
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 28 28b 28c 29		
Any Information copied from such Reports and State or for commercial purposes, other than using the nar					
NAME OF COMMITTEE (In Full)  American Hospital Association PAC					
Full Name (Last, First, Middle Initial) Boyd For Congress			Transaction ID: 17349900 Date of Disbursement		
Mailing Address P.O. Box 15703	06 0 26 7 2009				
City Tallahassee	State Zip Code FL 32317		Amount of Each Disbursement this Period		
Purpose of Disbursement Contribution		011	3500.00		
Candidate Name Rep. Allen Boyd		Category/ Type			
Senate 2	sement For: 2010  X Primary General  Other (specify)		Contribution		
State: FL District: 02  Full Name (Last, First, Middle Initial)  Sestak For Congress			Transaction ID: 17353620		
Mailing Address P.O. Box 16		Date of Disbursement  M 6 M / D 3 D / Y Y O Y 9			
City Media	State Zip Code PA 19063		Amount of Each Disbursement this Perio		
Purpose of Disbursement Void - Sestak For Congress	177	011	-1000.00		
Candidate Name Rep. Joe Sestak		Category/ Type			
	sement For: 2010  X Primary General  Other (specify)		Void - Sestak For Congress		
Full Name (Last, First, Middle Initial) Wicker For Senate			Transaction ID: 17356425 Date of Disbursement		
Mailing Address PO Box 64			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & G \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ I & T \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & O & O & O \\ I & I & O & O & O \end{bmatrix} \ Y$		
City Jackson	State Zip Code MS 39205		Amount of Each Disbursement this Perio		
Purpose of Disbursement 2012 Contribution		011	1000.00		
Candidate Name Sen. Roger Wicker		Category/ Type			
ÿ 🗎 [	sement For: 2012  K Primary General  Other (specify)		2012 Contribution		
SUBTOTAL of Disbursements This Page (optional	)		3500.00		
TOTAL This Period (last page this line number only			165500.00		

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		FOR LIN	NE NUMBER: PAGE 16 only one)						161	51 / 162	
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Any Information copied from such Reports and Statem or for commercial purposes, other than using the nam											s	
NAME OF COMMITTEE (In Full)												
American Hospital Association PAC												
Full Name (Last, First, Middle Initial) American Express								17346 ement	3748	3		
Mailing Address Ste. 001		06 02 2009										
City Chicago	State Zip Code			Δ	Amour	nt of	Each	Disburse	emer	nt this	Period	
Purpose of Disbursement Merchant Fees			001	<b> </b>		_				4.9	5	
Candidate Name		Cat	egory/ ype									
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Full Name (Last, First, Middle Initial)					_			.=				
American Express					Date o		sburse				V	
Mailing Address Ste. 001				] [	0 6	vi /	50	5 /	2	o ŏ	9 '	
City Chicago	State Zip Code IL 60679			Δ	Amour	nt of	Each	Disburse	emer			
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Candidate Name			egory/ ype									
Senate President	ement For: Primary General Other (specify)			M	lerch	ant	Fees	3				
Full Name (Last, First, Middle Initial) Merchant Bankcard					Date o			17346 ement			V	
Mailing Address 1601 Elm Street				] [	0 6	vi /	0	3 ′	2	o ŏ	9 '	
Dallas	State Zip Code TX 75201				Amour	nt of	Each	Disburse	-			
Purpose of Disbursement Merchant Fees			001	8						80.4	4	
Candidate Name			egory/ ype									
Office Sought: House Disburse Senate President	ement For:  Primary General  Other (specify)			М	lerch	ant	Fees	3				
State: District:												
SUBTOTAL of Disbursements This Page (optional)			▶	[						96.7	7	

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Office Sought:

State:

House

Senate

District:

President

Disbursement For:

Primary

Other (specify)

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NAME OF COMMITTEE (In Full)  American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Merchant Bankcard  Mailing Address 1601 Elm Street			Transaction ID: 17346752 Date of Disbursement  M 6 M / D 0 4 / Y Y Y O 9 9
,	State Zip Code TX 75201		Amount of Each Disbursement this Period
Purpose of Disbursement Merchant Fees Candidate Name	C	001 ategory/ Type	101.93
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify) ▼		Merchant Fees
Full Name (Last, First, Middle Initial) Citibank, F.S.B.			Transaction ID: 17346753 Date of Disbursement  M M / D 1 8 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1400 G Street, NW	71.0		
Washington Purpose of Disbursement	State Zip Code DC 20005	201	Amount of Each Disbursement this Period  30.75
Bank Fee Candidate Name		001 ategory/	

Туре

General

Bank Fee

SUBTOTAL of Disbursements This Page (optional)	<u> </u>	132.68
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